ANNUAL STATEMENT

OF THE

BE	BEACON MUTUAL INSURANCE COMPANY					
of	WARWICK					
in the state of	RHODE ISLAND					

TO THE

Insurance Department

OF THE

STATE OF RHODE ISLAND

FOR THE YEAR ENDED

December 31, 2016

PROPERTY AND CASUALTY



ANNUAL STATEMENT

For the Year Ended December 31, 2016 OF THE CONDITION AND AFFAIRS OF THE

The Beacon Mutual Insurance Company

	3490	3490	NAIC Company Code	24017	_ Employer's ID Num	ıber05-0-	458697
•	urrent Period)	(Prior Period)	•				
Organized under the Laws of		<u>d</u>	, State	of Domicile or Port of Enti	ry RI		
	US		1000	0			
Incorporated/Organized Statutory Home Office	One Beasen Contro	July 11, 1	1990	Commenced Bu	rwick, RI, US 02886-	August 12, 1992	
Statutory nome Office	One Beacon Centre		nd Number)	,vvai		State, Country and Zip Co	ode)
Main Administrative Office	One Beacor	•	,			, , ,	,
				(Street and Number)			
	Warwick, RI		- Ot		401-825-2667		
Mail Address Over De		(City or Town, State	e, Country and Zip Code)	(Area Cod	, , ,	•	
Mail Address One Be	eacon Centre	(Street and Number of	or P.O. Box)	,vvai	rwick, RI, US 02886- (City or Town,	State, Country and Zip Co	ode)
Primary Location of Books ar	nd Records	One Beacon Centre (Str	reet and Number)	Warwick, RI, (City or Town, Sta	US 02886-1378	401-825-2 de) (Area Code) (Telep	667
Internet Web Site Address	www.beaconmu	tual.com					
Statutory Statement Contact	Ann Lazzar	eschi	(A)		-825-2621	(5.1)	
	alamaraaah	:@haaaamuutual aam	(Name)	(Area Cod	de) (Telephone Nu	, , ,	
	alazzarescri	i@beaconmutual.com (E-l	Mail Address)			401-825-2659 (Fax Number)	
		(-	OFFICE	:De		(
		Nama	OFFICE		"41 -		
1.	James Vincent	Name		President & CEO	itle		
2.	Brian Joseph S				ounsel, Assistant Secre	-tary	
3.	Cynthia Lee La			Chief Financial Officer		шу	
			VICE-PRESI	DENTS			
Name			Title	Name	е	Т	itle
Pamela Lee Alarie		Vice President		Timothy Francis Benson		Vice President	
Robert Glenn DeOrsey		Vice President		Michael Dennis Lynch		Vice President	
Rajani Mahadevan		Vice President					
		-					
			DIRECTORS OR	TDIICTEEC			
		5 10111					
Harry Robert Bacon		Raymond Christopher		Richard James DeRienzo		James Vincent Rosati	
Carol Elaine Saccucci		Robert Anthony Walsh	ı Jr.	Myrth York		Linda D'Amario Rossi	
Kathleen Coyne-McCoy #							
State of Rhode Island							
County of Kent	ss						
The officers of this reporting entit	, , ,		•	1 0 ,,	1 0	'	
assets were the absolute proper	-		=	•		-	
explanations therein contained, a	nnexed or referred to	o, is a full and true statem	nent of all the assets and liabili	ties and of the condition and af	ffairs of the said reportir	ng entity as of the reportin	g period stated above
and of its income and deductions	therefrom for the pe	riod ended, and have be-	en completed in accordance w	ith the NAIC Annual Statemen	t Instructions and Accor	unting Practices and Proc	edures manual except
to the extent that: (1) state law n	may differ; or, (2) tha	at state rules or regulation	ons require differences in repo	rting not related to accounting	g practices and proced	ures, according to the be	st of their information
knowledge and belief, respectivel	ly. Furthermore, the	scope of this attestation b	by the described officers also in	ncludes the related correspond	ling electronic filing with	the NAIC, when required	I, that is an exact copy
(except for formatting differences	due to electronic fili	ng) of the enclosed state	ment. The electronic filing may	be requested by various regul	lators in lieu of or in add	dition to the enclosed state	ement.
(Signa	ature)		(Signat	ure)		(Signature)	
James Vinc	,		Brian Josep	•		Cynthia Lee Lawlo	nr
(Printed			(Printed N	· · · · · · · · · · · · · · · · · · ·	_	(Printed Name)	
(Printed 1.	,		(Printed i	iame)		(Printed Name)	
President			EVP, COO, General Couns	sel. Assistant Secretary		Chief Financial Office	cer
(Titl			(Title		_	(Title)	···
(110	,		(Title	7		(Tiue)	
Subscribed and sworn to (or affirm	med) hefore me this	on this					
•	nou, before the this (on this , 2017, by					
day of		, 2011, Dy			a le this on original fil	ling?	[Y1Voc 1Ni-
					a. Is this an original fil	•	[X]Yes []No
						ne amendment number	
					2. Date file		
					Numbe	er of pages attached	

ASSETS

	AGGETO		Current Year		Prior Year	
		1	2	3	4	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets	
1.	Bonds (Schedule D)	318,521,808		318,521,808	308,023,932	
2.	Stocks (Schedule D):					
l	2.1 Preferred stocks	861,800		861,800	861,800	
ı	2.2 Common stocks	17,813,966		17,813,966	14,199,049	
3.	Mortgage loans on real estate (Schedule B):					
ı	3.1 First liens					
	3.2 Other than first liens					
4.	Real estate (Schedule A):					
	4.1 Properties occupied by the company (less \$0 encumbrances)	11,173,328		11,173,328	11,558,043	
	4.2 Properties held for the production of income (less \$ 0 encumbrances)					
ı	4.3 Properties held for sale (less \$ 0 encumbrances)					
5.	Cash (\$ 2,564,552, Schedule E - Part 1), cash equivalents (\$ 0,					
	Schedule E - Part 2), and short-term investments (\$ 5,733,174, Schedule DA)	8,297,726		8,297,726	10,691,883	
6.	Contract loans (including \$ 0 premium notes)					
7.	Derivatives (Schedule DB)					
8.	Other invested assets (Schedule BA)	35,455		35,455	82,849	
9.	Receivables for securities					
10.	Securities lending reinvested collateral assets (Schedule DL)					
11.	Aggregate write-ins for invested assets					
12.	Subtotals, cash and invested assets (Lines 1 to 11)	356,704,083		356,704,083	345,417,556	
13.						
14.	Investment income due and accrued	2,953,002		2,953,002	3,045,069	
15.	Premiums and considerations:					
	15.1 Uncollected premiums and agents' balances in the course of collection	2,804,163	384,885	2,419,278	2,160,200	
	15.2 Deferred premiums, agents' balances and installments booked but deferred					
	and not yet due (including \$ 1,654,067 earned but unbilled premiums)	39,994,388	37,754	39,956,634	37,668,365	
	15.3 Accrued retrospective premiums (\$ 0) and contracts subject to					
	redetermination (\$ 0)					
16.	Reinsurance:					
	16.1 Amounts recoverable from reinsurers	777,735		777,735	339,099	
	16.2 Funds held by or deposited with reinsured companies					
	16.3 Other amounts receivable under reinsurance contracts					
	Amounts receivable relating to uninsured plans					
18.1						
18.2	Net deferred tax asset					
19.	Guaranty funds receivable or on deposit	4 400 405	000.474	000.004	040.070	
20.	Electronic data processing equipment and software	1,199,465	996,174	203,291	242,876	
21.	Furniture and equipment, including health care delivery assets (\$ 0)	148,346	148,346			
22.	Net adjustment in assets and liabilities due to foreign exchange rates	445.000		445.000	40.500	
23.	Receivables from parent, subsidiaries and affiliates	145,860		145,860	18,562	
24. 25	Health care (\$ 0) and other amounts receivable	2 074 070	0.054.007	4 040 070	4.072.004	
25.	Aggregate write-ins for other-than-invested assets Total assets avaluating Separate Assetuate Segregated Assetuate and	3,074,673	2,054,697	1,019,976	1,073,921	
26.	Total assets excluding Separate Accounts, Segregated Accounts and	407 004 745	2 004 050	404 470 050	200 005 040	
77	Protected Cell Accounts (Lines 12 to 25) From Separate Accounts, Segregated Accounts and Protected Cell Accounts	407,801,715	3,621,856	404,179,859	389,965,648	
27. 28	Total (Lines 26 and 27)	407,801,715	3,621,856	404,179,859	380 085 640	
28.	ו טומו (בווופס בט מווע בו)	401,001,115	3,021,030	404,173,009	389,965,648	

DETAILS OF WRITE-IN LINES				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	N L			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. Prepaid Expenses	1,995,247	1,995,247		
2502. SERP Accounts	1,007,208		1,007,208	1,036,845
2503. Miscellaneous Receivables	72,218	59,450	12,768	37,076
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	3,074,673	2,054,697	1,019,976	1,073,921

LIABILITIES, SURPLUS AND OTHER FUNDS

		1	2
		Current Year	Prior Year
1.	Losses (Part 2A, Line 35, Column 8)	129,500,630	116,685,842
2.	Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	11,223	9,984
3.	Loss adjustment expenses (Part 2A, Line 35, Column 9)	22,276,641	21,714,300
4.	Commissions payable, contingent commissions and other similar charges	6,352,749	5,378,282
5.	Other expenses (excluding taxes, licenses and fees)	6,810,970	6,886,712
6.	Taxes, licenses and fees (excluding federal and foreign income taxes)	9,069,108	9,149,082
7.1	Current federal and foreign income taxes (including \$ 0 on realized capital gains (losses))		
7.2	Net deferred tax liability		
8.	Borrowed money \$ 0 and interest thereon \$ 0		
9.	Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded		
	reinsurance of \$89,285 and including warranty reserves of \$0		
	and accrued accident and health experience rating refunds including \$0		
	for medical loss ratio rebate per the Public Health Service Act)	65,732,771	64,223,166
10.	Advance premium	2,852,533	3,176,310
11.	Dividends declared and unpaid:		
	11.1 Stockholders		
	11.2 Policyholders	2,079,604	3,401,812
12.		126,957	119,739
13.			
14.		470 004	219,508
15.		F0 000	120,400
16.			
17.			
18.			
19.	•		
20.	Derivatives		
21.			
22.			
23.	Liability for amounts held under uninsured plans		
24.	•		
25.	A managed a south a long for the little of	590,964	664,185
26.		245 641 593	231,749,322
27.	Protected cell liabilities	240,041,000	
	Total liabilities (Lines 26 and 27)	245,641,583	231,749,322
29.	Aggregate write-ins for special surplus funds	210,011,000	201,110,022
30.	Common capital stock		
31.	D () 1111		
32.	Aggregate write-ins for other-than-special surplus funds	20,758,685	20,758,685
33.	0 - 1 1		20,700,000
34.	Gross paid in and contributed surplus		
35.		137.779.591	137,457,641
36.		137,779,591	157,457,041
30.	·		
27		158,538,276	158,216,326
37.		404,179,859	
38.	Totals (Page 2, Lilie 26, Col. 3)	404,179,009	389,965,648
	DETAILS OF WRITE-IN LINES		
	DETAILS OF WAITE-IN LINES		600 650
2501	Deferred Gain - CH Investments	£90 NN7	
2501.		582,007	600,658
2502.	Miscellaneous Liabilities	582,007 8,957	15,428
2502. 2503.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed		
2502. 2503. 2598.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page	8,957	15,428 48,099
2502. 2503. 2598. 2599.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed		15,428 48,099
2502. 2503. 2598. 2599. 2901.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page	8,957	15,428 48,099
2502. 2503. 2598. 2599. 2901. 2902.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	8,957	15,428 48,099
2502. 2503. 2598. 2599. 2901. 2902. 2903.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	8,957	15,428 48,099
2502. 2503. 2598. 2599. 2901. 2902.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page	8,957	15,428 48,099
2502. 2503. 2598. 2599. 2901. 2902. 2903.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	8,957	15,428 48,099
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page	8,957	15,428 48,099 664,185
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	590,964	15,428 48,099 664,185
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	590,964	15,428 48,099 664,185
2502. 2503. 2598. 2599. 2901. 2902. 2903. 2998. 2999. 3201. 3202.	Miscellaneous Liabilities Retroactive Reinsurance Reserve Assumed Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) Capital assessment by RI Dept of Labor to provide residual market	590,964	15,428

STATEMENT OF INCOME

		1	2
		Current Year	Prior Year
	UNDERWRITING INCOME		
1.	Premiums earned (Part 1, Line 35, Column 4) DEDUCTIONS:	132,407,436	127,217,017
2.	Losses incurred (Part 2, Line 35, Column 7)	83,499,657	77,076,149
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1)		20,672,615
4. 5.	Other underwriting expenses incurred (Part 3, Line 25, Column 2)	40,128,491	39,664,383
6. 7.	Total underwriting deductions (Lines 2 through 5)	145,913,184	137,413,147
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(13,505,748)	(10,196,130)
٥.	INVESTMENT INCOME	1	
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	11,885,774	11,713,175
10.	Net realized capital gains (losses) less capital gains tax of \$ 0 (Exhibit of Capital Gains (Losses))	3,373,937	2,397,640
11.	Net investment gain (loss) (Lines 9 + 10)	15,259,711	14,110,815
	OTHER INCOME		
12.	Net gain or (loss) from agents' or premium balances charged off (amount recovered		
	\$ 272,571 amount charged off \$ (843,459))	(571,188)	(602,984)
13.	Finance and service charges not included in premiums	148,315	151,650
14.	Aggregate write-ins for miscellaneous income	33,382	135,768
	Total other income (Lines 12 through 14)	(389,491)	(315,566)
10.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,364,472	3,599,119
17	Dividende te nelle de la	1,304,472	2,637,740
	Net income, after dividends to policyholders, after capital gains tax and before	1,000,000	2,001,140
	all other federal and foreign income taxes (Line 16 minus Line 17)	364,472	961,379
19.	Federal and foreign income taxes incurred		
20.	Net income (Line 18 minus Line 19) (to Line 22)	364,472	961,379
	CAPITAL AND SURPLUS ACCOUNT		
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	158,216,326	158,074,765
22.	Net income (from Line 20)	364,472	961,379
23.	Net transfers (to) from Protected Cell accounts		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$ Oheren in act was alread frazing and page agricultural (loss)		
25. 26.	Change in net unrealized foreign exchange capital gain (loss) Change in net deferred income tax		
			(160,241)
28.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)		
29.	Change in surplus notes		
30.	Surplus (contributed to) withdrawn from protected cells		
31.	Cumulative effect of changes in accounting principles		
32.	Capital changes:		
	32.1 Paid in 32.2 Transferred from surplus (Stock Dividend)		
	000 7 6 14		
33	32.3 Transferred to surplus Surplus adjustments:		
.	33.1 Paid in		
	33.2 Transferred to capital (Stock Dividend)		
	33.3 Transferred from capital		
34.	Net remittances from or (to) Home Office		
35.	Dividends to stockholders		
36. 37	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)		
37. 38.	Aggregate write-ins for gains and losses in surplus Change in surplus as regards policyholders for the year (Lines 22 through 37)	321,951	141,561
39.	Surplus as regards policyholders, December 31 current year (Lines 21 plus Line 38) (Page 3, Line 37)	158,538,277	158,216,326
- 55.	estiplies as regards periodification, percentage or current year (Lines 2.1 plus Line 50) (1 age 5, Line 51)	100,000,211	100,210,020

	DETAILS OF WRITE-IN LINES		
0501.			
0502.	NONE		
0503.	NI INI-		
0598.	Summary of remaining write-ins for Line 05 from overflow page		
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 05 above)		
1401.	Retroactive Reinsurance Gain (Loss)	27,605	38,630
1402.	Miscellaneous Income (Loss)	3,857	(53,132)
1403.	Gain (Loss) on Disposal of Assets	1,920	270
1498.	Summary of remaining write-ins for Line 14 from overflow page		150,000
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	33,382	135,768
3701.			
3702.			
3703.			
3798.	Summary of remaining write-ins for Line 37 from overflow page		
3799.	Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)		

CASH FLOW

	1	2
Cash from Operations	Current Year	Prior Year
Premiums collected net of reinsurance	130,937,322	124,646,489
Net investment income	13,718,532	13,355,95
3. Miscellaneous income	(389,492)	(315,56
4. Total (Lines 1 through 3)	144,266,362	137,686,87
5. Benefit and loss related payments	71,123,842	80,425,51
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	61,024,940	60,199,78
8. Dividends paid to policyholders	2,322,209	2,169,66
9. Federal and foreign income taxes paid (recovered) net of \$ 0 tax on capital gains (losses	es)	
10. Total (Lines 5 through 9)	134,470,991	142,794,96
11. Net cash from operations (Line 4 minus Line 10)	9,795,371	(5,108,08
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	66,040,778	65,305,45
12.2 Stocks	07.005.004	20,663,46
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		123,77
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		13,70
12.8 Total investment proceeds (Lines 12.1 to 12.7)	94,036,439	86,106,39
13. Cost of investments acquired (long-term only):		
13.1 Bonds	76,496,485	54,359,1
13.2 Stocks	29,811,239	20,195,68
13.3 Mortgage loans		
13.4 Real estate		66,62
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	106,307,724	74,621,4
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(12,271,285)	11,484,9
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	81,757	32,67
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5	01 757	30 G
plus Line 16.6)		32,67
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS	*	
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(2,394,157)	6,409,54
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year		4,282,3
19.2 End of year (Line 18 plus Line 19.1)	8,297,726	10,691,88

Note: Supplemental disclosures of cash flow information for non-cash transactions:	
20.0001	
20.0002	
20.0003	

UNDERWRITING AND INVESTMENT EXHIBIT PART 1 – PREMIUMS EARNED

		1	2	3	4
			Unearned	Unearned	
		Net	Premiums Dec. 31	Premiums Dec. 31	Premiums
		Premiums	Prior Year-	Current Year-	Earned
		Written per	per Col. 3,	per Col. 5	During Year
	Line of Business	Column 6, Part 1B	Last Year's Part 1	Part 1A	(Cols. 1 + 2 - 3)
	-				, , , , , , , , , , , , , , , , , , , ,
ı	Fire				
l	Allied lines				
I	Farmowners multiple peril				
l	Homeowners multiple peril				
	Commercial multiple peril				
	Mortgage guaranty				
	Ocean marine				
	Inland marine				
	Financial guaranty				
I	Medical professional liability—occurrence				
I	Medical professional liability—claims-made				
I	Earthquake				
13.	Group accident and health				
14.	Credit accident and health				
	(group and individual)				
15.	Other accident and health				
16.	Workers' compensation	133,917,041	64,223,166	65,732,771	132,407,436
17.1	Other liability—occurrence				
17.2	Other liability—claims-made				
17.3	Excess workers' compensation				
18.1	Products liability—occurrence				
18.2	Products liability—claims-made				
	Private passenger auto liability				
I	Commercial auto liability				
l	Auto physical damage				
I	Aircraft (all perils)				
l	Fidelity				
1	Surety				
	Burglary and theft				
ı	Boiler and machinery				
	Credit				
l	International				
	Warranty				
	Reinsurance-nonproportional				
01.	assumed property				
32	Reinsurance-nonproportional				
J2.	accumed liability				
33	Reinsurance-nonproportional				
, ss.					
24	assumed financial lines				
54. 	Aggregate write-ins for other lines				
2-	of business	400 047 044	04.000.400	05 700 774	400 407 400
35.	TOTALS	133,917,041	64,223,166	65,732,771	132,407,436

DETAILS OF WRITE-IN LINES		
3401.		
3402.		
3403.	IONE	
3498. Sum of remaining write-ins for	NUNE	
3498. Sum of remaining write-ins for Line 34 from overflow page		
3499. Totals (Lines 3401 through 3403		
plus 3498) (Line 34 above)		

UNDERWRITING AND INVESTMENT EXHIBIT PART 1A – RECAPITULATION OF ALL PREMIUMS

		Amount Unearned (Running One Year or Less from Date of Policy)	2 Amount Unearned (Running More Than One Year from Date of Policy)	3 Earned but Unbilled	4 Reserve for Rate Credits and Retrospective Adjustments Based	5 Total Reserve for Unearned Premiums
	Line of Business	(a)	(a)	Premium	on Experience	Cols. 1 + 2 + 3 + 4
1.	Fire					
2.	Allied lines					
3.	Farmowners multiple peril					
4.	Homeowners multiple peril					
5.	Commercial multiple peril					
6.	Mortgage guaranty					
	Ocean marine					
	Inland marine					
10.	*					
11.1	Medical professional liability—occurrence					
11.2	Medical professional liablity—claims-made					
12.	Earthquake					
13.	Group accident and health					
14.	Credit accident and health					
	(group and individual)					
15.	Other accident and health					
16.	Workers' compensation	64,011,605			1,721,166	65,732,771
17.1	Other liability—occurrence					
	Other liability—claims-made					
	Products liability—claims-made					
	Private passenger auto liability					
	Commercial auto liability					
	Auto physical damage					
22.	Aircraft (all perils)					
	Fidelity					
	Surety					
	Burglary and theft					
	Boiler and machinery					
	Credit					
	*					
31.	Reinsurance-nonproportional					
	assumed property					
32.	Reinsurance-nonproportional					
20	assumed liability					
33.	Reinsurance-nonproportional					
24	assumed financial lines					
34.	Aggregate write-ins for other lines					
2-	of business	0404400=			1-01 100	05 =00 ==
	TOTALS	64,011,605			1,721,166	65,732,771
	Accrued retrospective premiums based on exp Earned but unbilled premiums	perience				
37.	. armed but unbilled pressures					

	DETAILS OF WRITE-IN LINES			
3401.				
3402.				
3403.		$\mathbf{N}()\mathbf{N}$		
3498.	Sum of remaining write-ins for	11011		
	Sum of remaining write-ins for Line 34 from overflow page			
	Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)			

⁽a) State here basis of computation used in each case

UNDERWRITING AND INVESTMENT EXHIBIT PART 1B – PREMIUMS WRITTEN

		1	Reinsurand	ce Assumed	Reinsurar	nce Ceded	6
			2	3	4	5	Net Premiums
		Direct		From		То	Written
		Business	From	Non-	То	Non-	Cols. 1 + 2 + 3 -
	Line of Business	(a)	Affiliates	Affiliates	Affiliates	Affiliates	4 - 5
1.	Fire						
2.	Allied lines						
	Farmowners multiple peril						
4.	Homeowners multiple peril						
	Commercial multiple peril						
	Mortgage guaranty						
	Ocean marine						
9.	Inland marine						
10.	Financial guaranty						
	Medical professional liabilityoccurrence						
	Medical professional liabilityclaims-made						
12.	Earthquake						
13.	Group accident and health						
14.	Credit accident and health						
	(group and individual)						
15.	a						
16.	Workers' compensation	134,976,989		6,348,010		7,407,958	133,917,041
	Other liability—occurrence						
	Other liability—claims-made						
	Excess workers' compensation						
	Products liability—occurrence						
	Products liability—claims-made						
	Private passenger auto liability						
	Commercial auto liability						
	Auto physical damage						
	Aircraft (all perils)						
	Fidelity						
24.	Surety						
26	Burglary and theft						
	Boiler and machinery						
	Credit						
	International						
	Warranty						
	Reinsurance-nonproportional						
01.	assumed property	xxx					
32	Reinsurance-nonproportional						
52.	assumed liability	XXX					
33	Reinsurance-nonproportional						
55.	assumed financial lines	XXX					
3/1	Aggregate write-ins for other lines						
34.							
35	of business TOTALS	134,976,989		6,348,010		7,407,958	133,917,041
33.	TOTALS	134,970,909		0,340,010		7,407,930	133,917,041

DETAILS OF WRITE-IN LINES				
3401.				
3402.				
3403.	 NIC	ZVIE		
3498. Sum of remaining write-ins for	INC			
Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

(a)	Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]	
	If yes: 1. The amount of such installment premiums \$ 0	
	2 Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$	0

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 – LOSSES PAID AND INCURRED

		Losses Paid L	ess Salvage		5	6	7	8
Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1. Fire								
2. Allied lines								
Farmowners multiple peril								
Homeowners multiple peril								
Commercial multiple peril								
6. Mortgage guaranty								
8. Ocean marine								
9. Inland marine								
10. Financial guaranty								
11.1 Medical professional liability—occurrence								
11.2 Medical professional liability—claims-made								
12. Earthquake								
13. Group accident and health								
14. Credit accident and health (group and individual)								
15. Other accident and health								
16. Workers' compensation	70,326,747	4,458,263	4,100,141	70,684,869	129,500,630	116,685,842	83,499,657	63.0
17.1 Other liability—occurrence								
17.2 Other liability—claims-made								
17.3 Excess workers' compensation								
18.1 Products liability—occurrence								
18.2 Products liability—claims-made								
19.1,19.2 Private passenger auto liability								
19.3,19.4 Commercial auto liability								
21. Auto physical damage								
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft								
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance-nonproportional assumed property	XXX							
32. Reinsurance-nonproportional assumed liability	XXX							
33. Reinsurance-nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business	70 000 F '-	1 1=0 655	1 100 / 11	70.001.000	100 -00 000	440.005.015	20 100 0==	
35. TOTALS	70,326,747	4,458,263	4,100,141	70,684,869	129,500,630	116,685,842	83,499,657	63.0
DETAILS OF WRITE-IN LINES								

DETAILS OF WRITE-IN LINES				
3401.				П
3402.				
3403.				
3498. Sum of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)				

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A – UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses		Incurred But Not Reported			8	9		
		1	2	3	4	5	6	7	1	
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
	. Fire									
1	2. Allied lines									
	B. Farmowners multiple peril									
4	. Homeowners multiple peril									
	. Commercial multiple peril									
	5. Mortgage guaranty									
	3. Ocean marine									
). Inland marine									
1 10). Financial guaranty									
	Medical professional liablity—occurrence Medical professional liablity—occurrence									
	2 Medical professional liablity—claims-made									
	2. Earthquake 3. Group accident and health								(0)	
1 13	Group accident and health (group and individual)								(a)	
14	Credit accident and health (group and individual)								(6)	
	5. Other accident and health 5. Workers' compensation		7 262 240				6,298,012	5,855,385	129,500,630	00.076.6
	1 Other liability—occurrence	97,171,774	7,363,319	21,342,677	83,192,416	45,865,587	0,290,012	3,000,000	129,500,650	22,276,6
	2 Other liability—claims-made									
17.	3 Excess workers' compensation									
17.	1 Products liability—occurrence									
10.	2 Products liability—occurrence									
	2 Private passenger auto liability									
10.1,19.	4 Commercial auto liability									
19.3, 19.	Auto physical damage									
21	2. Aircraft (all perils)									
	3. Fidelity									
	l. Surety									
26	5. Burglary and theft									
27	7. Boiler and machinery									
	B. Credit									
). International									
). Warranty									
	Reinsurance-nonproportional assumed property	XXX				XXX				
	2. Reinsurance-nonproportional assumed liability	XXX				XXX				
33	Reinsurance-nonproportional assumed financial lines	XXX				XXX			1	
34	Aggregate write-ins for other lines of business									
35	5. TOTALS	97,171,774	7,363,319	21,342,677	83,192,416	45,865,587	6,298,012	5,855,385	129,500,630	22,276,64
	-	- , , , , , ,	7-1-10-10	1- 17**		-11	-,,			, , , , , , ,
	DETAILS OF WRITE-IN LINES									
3401										
3402	2									
3403				· · · · · · · · · · · · · · · · · · ·	· 7 () - · · · · ·					
	3. Sum of remaining write-ins for Line 34 from overflow page			· · · · · · · · · · · · · · · · · · ·	ONE					
, 5,00	9. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)							+	-	

(a) Including \$ 0 for present value of life indemnity claims.

UNDERWRITING AND INVESTMENT EXHIBIT PART 3 - EXPENSES

		1	2	3	4
		'			4
		Loss Adjustment	Other Underwriting	Investment	
		Expenses	Expenses	Expenses	Total
1.	Claim adjustment services:				
	1.1 Direct	3,967,684			3,967,684
	1.2 Reinsurance assumed	687,660			687,660
	1.3 Reinsurance ceded	215,462			215,462
	1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	4,439,882			4,439,882
2.	Commission and brokerage:				
	2.1 Direct, excluding contingent		8,739,502		8,739,502
	2.2 Reinsurance assumed, excluding contingent		1,172,605		1,172,605
	2.3 Reinsurance ceded, excluding contingent				
	2.4 Contingent—direct		4,651,348		4,651,348
	2.5 Contingent—reinsurance assumed				
	2.6 Contingent—reinsurance ceded		138,174		138,174
	2.7 Policy and membership fees				
	2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 +				
	2.4 + 2.5 - 2.6 + 2.7)		14,425,281		14,425,281
3.	Allowances to manager and agents				
	Advertising		316,252		316,252
	Boards, bureaus and associations		621,771		621,771
6.	Surveys and underwriting reports		47,112		47,112
7.	Audit of assureds' records		183,041		183,041
8.	Salary and related items:				
	8.1 Salaries	10,744,478	6,922,327	75,852	17,742,657
	8.2 Payroll taxes	796,556	513,292	5,624	1,315,472
9.	Employee relations and welfare	2,836,243	1,827,644	20,023	4,683,910
10.	Insurance	333,670	215,013	2,356	551,039
	Directors' fees	135,657	87,416	958	224,031
	Travel and travel items	88,472	158,056	1,050	247,578
13.	Rent and rent items	864,212	578,739	7,658	1,450,609
14.	Equipment	635,180	1,134,759	7,541	1,777,480
15.	Cost or depreciation of EDP equipment and software	249,137	445,087	2,958	697,182
	Printing and stationery	86,971	155,374	1,032	243,377
17.	Postage, telephone and telegraph, exchange and express	246,513	440,401	2,926	689,840
	Legal and auditing	701,069	779,648	5,412	1,486,129
19.	Totals (Lines 3 to 18)	17,718,158	14,425,932	133,390	32,277,480
20.	Taxes, licenses and fees:				
	20.1 State and local insurance taxes deducting guaranty				
	association credits of \$ 0		11,109,739		11,109,739
	20.2 Insurance department licenses and fees	126,996	81,834	897	209,727
	20.3 Gross guaranty association assessments				
	20.4 All other (excluding federal and foreign income and real estate)		85,705		85,705
	20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	126,996	11,277,278	897	11,405,171
21.	Real estate expenses			441,663	441,663
	Real estate taxes			247,346	247,346
23.	Reimbursements by uninsured plans				
24.	Aggregate write-ins for miscellaneous expenses			484,100	484,100
25.	Total expenses incurred	22,285,036	40,128,491	1,307,396	1
	Less unpaid expenses—current year	22,276,641	22,232,827		44,509,468
	Add unpaid expenses—prior year	21,714,300	21,414,076		43,128,376
	Amounts receivable relating to uninsured plans, prior year				
	Amounts receivable relating to uninsured plans, current year				
30.	TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	21,722,695	39,309,740	1,307,396	62,339,831

DETAILS OF WRITE-IN LINES			
2401. Professional Maintenance Expense		484,100	484,100
2402.			
2403.	 		
2498. Sum of remaining write-ins for Line 24 from overflow page			
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)		484.100	484.100

(a) Includes management fees of \$ 0 to affiliates and \$ 0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

			1 lected ng Year	2 Earned During Year			
1.	U.S. Government bonds	(a)	762,066	725,904			
1.1	Bonds exempt from U.S. tax	(a)	59,638	56,767			
1.2	Other bonds (unaffiliated)	(a)	10,973,375	10,928,647			
1.3	Bonds of affiliates	(a)					
2.1	Preferred stocks (unaffiliated)	(b)	78,625	78,625			
2.11	Preferred stocks of affiliates	(b)					
2.2	Common stocks (unaffiliated)		505,528	497,222			
2.21	Common stocks of affiliates						
3.	Mortgage loans	(c)					
4.	Real estate	(d)	1,259,941	1,259,941			
5.	Contract loans						
6.	Cash, cash equivalents and short-term investments	(e)	10,895	10,895			
7.	Derivative instruments	(f)					
8.	Other invested assets						
9.	Aggregate write-ins for investment income	l	19,884	19,884			
10.	Total gross investment income		13,669,952	13,577,885			
11.	Investment expenses			(g) 1,306,499			
12.	Investment taxes, licenses and fees, excluding federal income taxes			(g) 897			
13.	Interest expense	(h)					
14.	4. Depreciation on real estate and other invested assets (i)						
15.							
16.	6. Total deductions (Lines 11 through 15) 1,692,111						
17.	Net investment income (Line 10 minus Line 16)			11,885,774			

	DETAILS OF WRITE-IN LINES		
0901.	SERP Accounts	19,884	19,884
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 09 from overflow page		
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)	19,884	19,884
1501.			
1502.	NONE		
1503.	NUINE		
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

(a)	Includes \$	91,418 accrual of discount less \$	1,413,753 amortization of premium and less \$	222,236 paid for accrued interest on purchases.
(b)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued dividends on purchases.
(c)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(d)	Includes \$	1,259,941 for company's occupancy of its	own buildings; and excludes \$ 0 inte	erest on encumbrances.
(e)	Includes \$	0 accrual of discount less \$	0 amortization of premium and less \$	0 paid for accrued interest on purchases.
(f)	Includes \$	0 accrual of discount less \$	0 amortization of premium.	
(g)	Includes \$	1,306,499 investment expenses and \$	897 investment taxes, licenses and fees,	excluding federal income taxes,
	attributable to	segregated and Separate Accounts.		
(h)	Includes \$	0 interest on surplus notes and \$	0 interest on capital notes.	
(i)	Includes \$	384,715 depreciation on real estate and	\$0 depreciation on other invested a	assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss)	Other	Total Realized		Change in Unrealized
		on Sales or	Realized	Capital Gain (Loss)	Change in Unrealized	
		Maturity	Adjustments	(Columns 1 + 2)	Capital Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds	747,462		747,462		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	665,674	(41,180)	624,494	(7,447)	
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)	1,948,378		1,948,378	(178,821)	
2.21	Common stocks of affiliates				29,782	
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)	53,603		53,603	(8,809)	
10.	Total capital gains (losses)	3,415,117	(41,180)	3,373,937	(165,295)	

	DETAILS OF WRITE-IN LINES				
0901.	Capital Gain Pt. Judith Venture Fund	33,639	33,639	(47,395)	
0902.	Realized gains on sales of investments with deferred gains	18,652	18,652		
0903.	SERP Accounts	1,312	1,312	38,586	
0998.	Summary of remaining write-ins for Line 09 from overflow page				
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 09 above)	53,603	53,603	(8,809)	

EXHIBIT OF NONADMITTED ASSETS

		1	2	3
		Current Year		
		Total	Prior Year	Change in Total
		Nonadmitted	Total	Nonadmitted Assets
		Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)			
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			
	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First lines			
	3.2 Other than first lines			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	(
	investments (Schedule DA)			
	Contract loans			
_	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
	Title plants (for Title insurers only)			
	Investment income due and accrued			
15.	Premiums and considerations:		00	(440.044)
	15.1 Uncollected premiums and agents' balances in the course of collection	384,885	235,574	(149,311)
	15.2 Deferred premiums, agents' balances and installments booked but deferred	27.754	74.054	22.407
	and not yet due	37,754	71,251	33,497
16	15.3 Accrued retrospective premiums and contracts subject to redetermination			
10.	Reinsurance:			
	 16.1 Amounts recoverable from reinsurers 16.2 Funds held by or deposited with reinsured companies 			
	16.3 Other amounts receivable under reinsurance contracts			
17	Annual and a simple relation to unincome delana			
18.1	Current federal and fereign income toy recoverable and interest thereon			
18.2	Not deferred toy const			
19.	Guaranty funds receivable or on deposit			
20.	Electronic data processing equipment and software	006 174	1,105,737	109,563
21.	Furniture and equipment, including health care delivery assets	148,346	142,273	(6,073)
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable			
25.	Aggregate write-ins for other-than-invested assets	2,054,697	2,189,798	135,101
	Total assets excluding Separate Accounts, Segregated Accounts and	, , , , ,	, , , , ,	, -
	Protected Cell Accounts (Lines 12 to 25)	3,621,856	3,744,633	122,777
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
	Total (Lines 26 and 27)	3,621,856	3,744,633	122,777

DETAILS OF WRITE-IN LINES			
1101.			
1102.			
1103. N()NH			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
2501. Prepaid Expenses	1,995,247	2,111,059	115,812
2502. Miscellaneous Receivables	59,450	78,739	19,289
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599 Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	2 054 697	2 189 798	135 101

1. Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of The Beacon Mutual Insurance Company (the "Company") have been prepared in conformity with insurance accounting practices prescribed or permitted by the Rhode Island Insurance Department. The State of Rhode Island requires insurance companies domiciled in the State of Rhode Island to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual.

SSAP 97 requires investments in subsidiaries to be carried at the entity's underlying audited statutory equity. As the Castle Hill Insurance subsidiary ("Castle Hill") has been inactive since its inception, the State of Rhode Island has granted the subsidiary an exemption from filing audited financial statements. As such, the State of Rhode Island has also granted a permitted practice to allow Castle Hill to be recorded on the Company's balance sheet as an invested asset at its unaudited statutory equity value.

A summary of the impact of the permitted practice on the Company's net income and surplus as a result of recording Castle Hill as an invested asset is estimated to be as follows:

		F/S	F/S		
	SSAP#	Page	Line#	2016	2015
NET INCOME					
Rhode Island Basis	97	4	20	\$ 364,472	\$ 961,379
State Permitted Practice:					
Value of Castle Hill subsidiary					
NAIC SAP	97	4	20	\$ 364,472	\$ 961,379
SURPLUS					
Rhode Island Basis	97	3	37	\$158,538,277	\$ 158,216,326
State Permitted Practice:					
Value of Castle Hill subsidiary				(1,350,844)	(1,321,062)
NAIC SAP	97	3	37	\$157,187,433	\$ 156,895,264

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of the financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements along with the reported amounts of revenues and expenses during the reporting period. Significant items subject to such estimates and assumptions include the Company's loss and loss adjustment expense reserves which have a significant effect on Incurred Losses and Loss Adjustment Expenses and related Net Income. Actual results could differ from these estimates.

C. Accounting Policies

Premiums are earned over the terms of the related policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance assumed. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as agent commissions, are charged to operations as incurred.

Real estate investments are classified in the balance sheet as properties occupied by the Company and carried at depreciated cost less encumbrances, if any. The fair values reported in Schedule A - Part 1 were obtained from an external independent appraisal company with values as of December 1, 2014.

In addition, the Company uses the following accounting policies:

1. Short-term investments are stated at amortized value using the interest method. Non-investment grade short-term investments are stated at the lower of amortized value or fair market value.

- 2. Bonds not backed by other loans are stated at amortized value using the interest method. Non-investment grade bonds are stated at the lower of amortized value or fair market value.
- 3. Common stocks, other than investments in stocks of subsidiaries, are stated at fair market value.
- 4. Redeemable preferred stocks are stated at cost or amortized cost in accordance with NAIC guidance. Perpetual preferred stocks are stated at fair market value. Non-investment grade preferred stocks are stated at the lower of amortized value or fair value.
- 5. The Company does not own mortgage loans.
- 6. Loan-backed securities are stated at amortized value. The retrospective adjustment method is used to value all loan-backed securities.
- 7. The Company values its investments in subsidiaries as follows: GAAP basis for BMIC Service Corporation and the Statutory Equity Method for Castle Hill Insurance Company as described in part Eight, Section 3a(ii) C and Part Eight Section 3 a (ii) A & F, respectively, of the NAIC Purposes and Procedures Manual of the Securities Valuation Office.
- 8. The Company has minor ownership interests in joint ventures and partnerships which are carried at fair market value.
- 9. The Company does not invest in derivatives.
- 10. The Company anticipates investment income as a factor in the premium deficiency calculation in accordance with SSAP No. 53 - Property-Casualty Contract Premiums and was not required to record a premium deficiency reserve as of December 31, 2016.
- 11. The Company provides reserves for unpaid insurance losses and loss adjustment expenses which cover events that occurred in the current and prior years. These reserves reflect estimates of the total cost of claims reported but not yet paid, and the cost of claims not yet reported, as well as the estimated expenses necessary to settle the claims. Reserve estimates are based on past loss experience modified for current claim trends as well as prevailing social, economic and legal conditions. Final claim payments may ultimately differ from the established reserves, particularly when these payments may not occur for several years. Reserve estimates are continually reviewed and updated and any resulting adjustments are reflected in current operating results.

Reserves are reduced for amounts to be recovered through reinsurance agreements but are not discounted or reduced for estimated salvage and subrogation recoveries. Salvage and subrogation recoveries are recorded when received.

- 12. The Company has a written capitalization policy for the purchase of items such as land, buildings and improvements, leasehold improvements, furniture and equipment, leased property, software, electronic data processing equipment, vehicles and other equipment. No change has taken place during the year.
- 13. The Company has no pharmaceutical rebate receivables.
- 2. Accounting Changes and Corrections of Errors
 - A. Accounting Changes Other than Codification and Corrections of Errors

Not applicable

3. Business Combinations and Goodwill

There were no business combinations.

4. Discontinued Operations

- 5. Investments
 - A. The Company does not invest in mortgages loans, including mezzanine real estate loans.

- B. The Company does not invest in debt restructuring.
- C. The Company does not invest in reverse mortgages.
- D. Loan-Backed Securities
 - 1. Prepayment assumptions for single class and multi-class mortgage backed/ asset-backed securities were obtained from an external investment manager.
 - 2. Not applicable.
 - 3. The Company did not recognize an other-than-temporary impairment during 2016.
 - 4. The following summarizes gross unrealized investment losses on loan-backed and structured securities by the length of time that securities have continuously been in an unrealized loss position.
 - a. The aggregate amount of unrealized losses:

1. Less than 12 Months \$ (1,556,818) 2. 12 Months or Longer (114,332) (1,671,150)

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months \$56,992,971
2. 12 Months or Longer 8,841,765
65,834,736

- 5. All loan-backed and structured securities in an unrealized loss position were reviewed to determine whether an other-than-temporary impairment should be recognized. For those securities in an unrealized loss position as of December 31, 2016, the Company has not made a decision to sell any such securities. The Company evaluated its cash flow requirements and believes that its liquidity is adequate and it will not be required to sell these securities before recovery of their cost basis. As of December 31, 2016, the Company can attest that it has the intent and believes that it has the ability to hold these securities long enough to allow the cost basis of these securities to be recovered. The conclusions are determined by a detailed analysis of the underlying credit and cash flows on each security. It is possible that the Company could recognize other than temporary impairments in the future on some of the securities held at December 31, 2016 if future events, information, and the passage of time causes it to conclude that declines in value are other than temporary.
- E. Repurchase Agreements

Not applicable

F. Writedowns for Impairments of Real Estate, Real Estate Sales and Retail Land Sales Not applicable

G. Low Income Housing Tax Credits

- H. Restricted Assets
 - 1. Restricted Assets (Including Pledged)

Restricted Asset Category				Gross (Admitted	& Nonadmitte	ed) Restricted		8	9	Restricted to Total Assets Admitte Assets 0.2% 0.2% 0.1% 0.1	ntage
			Current Year			6	7			10	11
	1	2	3	4	5						
	Total	G/A	Total	Protected Cell	Total	Total From	Increase/	Total	Total	Gross	Admitted
	General	Supporting	Protected Cell	Account Assets		Prior Year	Decrease	Nonadmitted	Admitted	Restricted	Restricted
	Account	Protected	Account	Supporting G/A				Restricted	Restricted	to Total	to Total
	(G/A)	Cell Account	Restricted	Activity (b)						Assets	Admitted
		Activity	Assets								Assets
On deposit with states	\$ 839,084	\$ -	\$ -	\$ -	\$ 839,084	\$ 846,174	\$ (7,090)	\$ -	\$ 839,084	0.2%	0.2%
On deposit with regulatory bodies	\$ 400,000	\$ -	\$ -	\$ -	\$ 400,000	\$ 400,292	\$ (292)	\$ -	\$ 400,000	0.1%	0.1%
Pledged as collateral not captured in other categories	\$ 21,498,159	\$ -	\$ -	\$ -	\$ 21,498,159	\$ 19,564,252	\$1,933,907	\$ -	\$21,498,159	5.3%	5.3%
Total Restricted Assets	\$ 22,737,243	\$ -	\$ -	\$ -	\$ 22,737,243	\$ 20,810,718	\$1,926,525	\$ -	\$22,737,243	5.6%	5.6%

Restricted assets include those securities pledged to cedants as part of reinsurance collateral and to state and governmental agencies.

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories

Restricted Asset Category				8	Percenta	ige				
			Current Year			6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity	Protected Cell	Protected Cell Account Assets Supporting G/A Activity (b)	Total	Total From Prior Year	Increase/ Decrease	Total Current Year Admitted Restricted	Gross (Admitted and Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
Pledged to cedants as part of reinsurance collateral	\$ 5,323,060	\$ -	\$ -	\$ -	\$ 5,323,060	\$ 5,363,332	\$(40,272)	\$ 5,323,060	1.3%	1.39
Collateral trust agreement with ceding resinsurer	\$ 16,175,099	\$ -	\$ -	\$ -	\$16,175,099	\$14,200,920	\$1,974,179	\$16,175,099	4.0%	4.09
Total Restricted Assets	\$ 21,498,159	\$ -	\$ -	\$ -	\$ 21,498,159	\$19,564,252	\$1,933,907	\$21,498,159	5.3%	5.3%

3. Detail of Other Restricted Assets

Not applicable

4. Collateral Received and Reflected as Assets

Not applicable

I. Working Capital Finance Investments

Not applicable

J. Offsetting and Netting of Assets and Liabilities

Not applicable

K. Structured Notes

Not applicable

L. 5* Securities

The Company has no investment securities with a 5* NAIC designation in the current or prior year.

- 6. Joint Ventures, Partnerships and Limited Liability Companies
 - A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.
 - B. When it appears probable that the Company will be unable to recover the outstanding carrying value of an investment, or there is evidence indicating an inability of the investee to sustain earnings which would justify the carrying value of the investment, an other-than-temporary impairment is recognized in realized capital losses for the excess of the carrying value over the estimated fair value of the investment. During 2016, the Company did not recognize any impairments for its investments in Point Judith Venture Fund or Business Development Company of Rhode Island. The estimated fair value was determined by evaluating the Company's current equity value in the underlying investment, performed by assessing the corporations' balance sheet and current financial condition.

7. Investment Income

- A. Due and accrued income was excluded from surplus for all investment income due and accrued with amounts that are over 90 days past due.
- B. Amounts nonadmitted

None

8. Derivative Instruments

The Company has no derivative financial instruments.

9. Income Taxes

The Company is tax exempt under section 501 (c) (27) of the Internal Revenue Code.

10. Information Concerning Parent, Subsidiaries and Affiliates and Other Related Parties

A. Nature of Relationships

The Company is a non-profit public corporation organized and operated as a domestic mutual insurance company under the laws enacted by the Rhode Island legislature. In accordance with its enabling legislation, the Company is managed by a Board of Directors, the majority of whom serve via appointment by the Governor of the State of Rhode Island. The Company is not directly or indirectly owned or controlled by any other Company. The Company is a parent company of its wholly owned subsidiaries - BMIC Service Corporation and Castle Hill Insurance Company.

The Company's charter provides extraordinary provisions to ensure the continued adequacy of the Company's capitalization and solvency. Most importantly, the Company's charter provides for the implementation and continuation of a special state-wide capital assessment funding mechanism to be administrated by the Rhode Island Department of Labor and Training, as a means to establish and maintain the reserves and surplus required for the company to meet policyholder obligations and serve Rhode Island's residual risk market. Provisions for the Capital Assessment are set forth in Public Law 2003, Chapter 410, Section 19 which provides that the Director of the Rhode Island Department of Business Regulation shall place an assessment (for the benefit of the Company) upon all premiums for workers' compensation and employers' liability insurance written or renewed within the State in an amount required to ensure both the solvency of the Company and the Company's ability to establish surplus reasonably adequate to allow it to write required insurance. If required, such law provides for continuing capital assessment funding of the Company at whatever level may be necessary to assure the Company's future solvency on an indefinite basis.

B. Detail of Transactions Greater than ½% of Admitted Assets

Not applicable

C. Change in Terms of Intercompany Arrangements

None

D. Amounts Due to or from Related Parties

At the end of the current year, the Company reported \$145,860 due from its subsidiary BMIC Service Corporation. No amount is due from Castle Hill Insurance Company at year end. The inception-to-date impairment of the BMIC Service Corporation receivable is \$97,616 at December 31, 2016 and 2015. No impairments or recoveries on impaired receivables were necessary during 2016. The Company recognized a recovery on impaired receivables of \$150,000 in 2015. The balance due from BMIC Service Corp on the financials is net of the impairment. The Company has no current year amounts payable to its subsidiaries.

E. Guarantees or Contingencies for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Arrangements

The Company has agreed to provide certain management and data processing services to its wholly-owned subsidiaries.

G. Nature of Relationships that Could Affect Operations

Not applicable

H. Amount Deducted for Investment in Upstream Company

Not applicable

Detail of Investments in SCA Entity Greater than 10% of Admitted Assets

Not applicable

J. Writedown or Impairments of Investments in SCA Entities

No impairment was recorded in 2016.

K. Foreign Insurance Subsidiary Valued Using CARVM

Not applicable

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable.

M. Non-Insurance Subsidiary, Controlled and Affiliated (SCA) Entities Valuations

The Company owns 100% of an insurance agency, BMIC Service Corp; after determining that BMIC Service Corp would not recover its original cost within a reasonable timeframe, the Company permanently impaired the investment (\$15,000) bringing the value to zero. As a result, no value is reflected in the Company's financial statements. The NAIC agreed with the Company's prior year valuation and Sub-2 filling.

	C ype of NAIC	Date of	NAIC	NAIC	NAIC Disallowed	Code
SCA Entity	Filing	Filing to	Valuation	Response	Entities Valuation	
00/12/10/04		the NAIC	Amount	Received	Method,	
					Resubmission	
					Required	
BMIC Service Corp	SUB 2	03/21/16	0	Υ	N	I

N. Insurance SCA Entities Utilizing Prescribed or Permitted Practices

The Company owns one insurance SCA entity, Castle Hill Insurance Company. As Castle Hill has been inactive since its inception, the State of Rhode Island has granted a permitted practice to exempt Castle Hill from filing audited financials and an actuarial opinion. There is no impact to Castle Hill's financials for this exemption. This exemption did not trigger any risk-based capital or other regulatory event. The impact of carrying the unaudited statutory equity value on the Company's books is reflected in Note 1.

11. Debt

The Company does not have any capital notes or reverse repurchase agreements at December 31, 2016.

The Company has an irrevocable standby letter of credit with Bank of America for the benefit of General Reinsurance Corporation. The credit limit was \$3,431,903 and \$4,107,134 as of December 31, 2016 and 2015, respectively. To collateralize this letter of credit, the Company was required to deposit US Agency securities with Bank of America. The carrying value of the deposit is \$5,323,060 and \$5,363,332 at December 31, 2016 and 2015 respectively.

- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans
 - A. Defined Benefit Plan

The Company has no defined benefit plans

B. Investment policies and strategies of defined benefit plans

Not applicable

C. Fair value of each class of plan assets of defined benefit plans

Not applicable

D. Narrative description of the basis used to determine the overall expected rate of return on assets assumption

E. Defined Contribution Plans

The Company sponsors a qualified 401(k) defined contribution plan for all employees. The Company matches 50% of the employee's contribution up to 6% of an individual's gross salary and may contribute additional amounts as authorized by the Board of Directors within IRS limitations on compensation, elective deferrals and annual additions. Employees vest ratably in the matching contribution over five years. The Company's expense under this plan totaled \$1,872,391 and \$1,739,969 for the years ended December 31, 2016 and 2015, respectively. At December 31, 2016, the fair value of plan assets was \$61,469,293.

F. Multiemployer Plan

Not applicable

G. Consolidated/Holding Company Plans

Not applicable

H. Postemployment Benefits and Compensated Absences

During 2003, the Company entered into employment agreements with certain key employees; the Company's total commitment for officers under these employment agreements was \$1,814,705 at December 31, 2016.

The Company also established a Rabbi Trust for a former executive officer, during 2002, with an initial value of \$1,358,258. The account included bonds, equities and money market funds; the fair value of the trust at December 31, 2016 is \$0 as 100% of the remaining funds were distributed during 2016. During 2007, an additional trust was established for an active senior executive with initial funding of \$75,000. Additional annual payments of \$75,000 were made for years 2008 through 2016. This trust account includes bonds, equities and money market funds; the fair value of the trust was \$1,007,208 at December 31, 2016 and is listed in other assets of the Company.

Obligations for post-employment benefits and compensated absences have been accrued for in accordance with SSAP 11 in prior periods.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 02-17)

The Company does not sponsor a postretirement health care benefit plan.

- 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations
 - A. Authorized and Outstanding Shares

Not applicable

B. Dividend Rate of Preferred Stock

Not applicable

C. Dividend Restrictions

Policyholder dividends are paid out of unassigned surplus in accordance with a percentage or amounts approved by the Board of Directors. Dividends declared and unpaid are recorded as a liability. The Company is required to satisfy the legal minimum capital requirements of its domiciliary state - Rhode Island. Under the terms of its enabling act, the Company may declare a dividend when there is an excess of assets over liabilities and minimum surplus requirements.

The Company maintains a shared earnings program in support of its loss prevention and claim cost containment initiatives. Shared earnings are computed 18 months after policy inception based on an individual policy's incurred loss experience. These shared earnings plans are estimated, accrued and accounted for as retrospectively rated policies.

D. Dates and Amounts of Dividends Paid

In December 2016, the Board of Directors declared a dividend of .74% of final audit premium, representing approximately \$1,000,000, to be paid to all eligible policyholders of record as of December 30, 2016. In December 2015, the Board of Directors declared a dividend of 2% of final audit premium, representing approximately \$2,637,740, to be paid to all eligible policyholders of record as of December 30, 2015.

E. Amount of Ordinary Dividends that May Be Paid

No restriction other than stated above.

F. Restrictions on Unassigned Funds

There were no restrictions placed on the Company's surplus.

G. Mutual Surplus Advances

Not applicable

H. Company Stock Held for Special Purposes

Not applicable

I. Changes in Special Surplus Funds

Not applicable

J. Change in Unassigned Funds

The portion of unassigned funds (surplus) represented by cumulative unrealized gains (net of losses) is as follows:

Unrealized gains or (losses): (\$165,297)

K. Surplus Notes

Not applicable

L. Impact of Quasi-Reorganizations

Not applicable

M. Date of Quasi-Reorganizations

Not applicable

- 14. Liabilities, Contingencies and Assessments
 - A. Contingent Commitments

Not applicable

B. Assessments

Not applicable

C. Gain Contingencies

Not applicable

D. Extra Contractual Obligation and Bad Faith Losses

Not applicable

E. Product Warranties

Not applicable

F. Joint and Several Liabilities

Not applicable

G. All Other Contingencies

The Company is and may become involved in various actions and legal proceedings arising out of and incidental to its normal course of business. Management, based on its review with counsel, is unable to reasonably estimate the impact and scope of any potential liability, if any, that may exist as a result of these actions or proceedings.

15. Leases

- A. Lessee Leasing Arrangements
 - 1. The Company leases office equipment under various noncancelable operating lease agreements that expire in 2020. Total lease and rent expense for 2016 and 2015 was approximately \$1,296,859 and \$1,319,767, respectively. Rental expense recognized as part of occupancy costs and included in lease and rent expense totalled \$1,211,941 in each year.
 - 2. Future minimum aggregate lease commitments are as follows:

Year Ending December 31	<u>Amount</u>
2017	48,028
2018	35,175
2019	31,703
2020	7,318
	\$ 122,224

B. Lessor Leasing Arrangements

The Company owns a commercial real estate building which leases office space to a tenant. The typical lease period is five years. The Company is responsible for the payment of property tax, insurance, and repair and maintenance costs related to the leased property. The Company records expenses related to the building as investment expenses and accrues lease payments due as investment income.

Future minimum lease payments receivable under the noncancelable leasing arrangement as of December 31, 2016 are as follows:

Year Ending December 31	<u>Amount</u>
2016	48,000
2017	48,000
2018	48,000
2019	24,000
	\$ 168,000

C. Sale-leaseback Transactions

The Company is not involved in any sales – leaseback arrangement.

16. Information About Financial Instruments With Off-Balance Sheet Risk

The Company does not have any financial instruments with off-balance sheet risk.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. Transfers of Receivables Reported as Sales

Not Applicable

B. Transfer and Servicing of Financial Assets

Not Applicable

- C. Wash Sales
 - Occasionally, market conditions prevail such that a security fitting a sell profile will resurface quickly as an attractive investment for purchase. In these circumstances, investment opportunities are taken irrespective of the proximity of prior transaction dates.
 - 2. At December 31, 2016, no securities with an NAIC Designation 3 or below were sold and reacquired within 30 days of the sale date.
- 18. Gain or Loss from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

The Company does not write Accident & Health business.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

The Company does not utilize managing general agents or third party administrators to write business.

20. Fair Value Measurement

A. Inputs Used for Assets and Liabilities Measured at Fair Value

1. Fair Value Measurements by Levels 1, 2 and 3

The Company has categorized its assets and liabilities that are measured at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows:

Level 1 –Values are unadjusted quoted prices for identical assets and liabilities in active markets accessible at the measurement date.

Level 2 --Inputs include quoted prices for similar assets or liabilities in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are observable or can be corroborated by market data for the term of the instrument. Such inputs include market interest rates and volatilities, prepayment speeds, spreads and yield curves.

Level 3 --Certain inputs are unobservable (supported by little or no market activity) and significant to the fair value measurement. Unobservable inputs reflect the Company's best estimate of what hypothetical market participants would use to determine a transaction price for the asset or liability at the reporting date.

The following tables provide information as of December 31, 2016 and 2015 about the Company's financial assets and liabilities measured at fair value.

		Level 1		Level 2		_evel 3		Total	
Assets at fair value (in 000	's):								
Short-term investments	\$	5,733	\$	- ;	\$	-	\$	5,733	
Bonds		-		345		-		345	
Preferred stock		-		-		-		-	
Common stock		16,463		-		-		16,463	
Total assets at fair value	\$	22,196	\$	345	\$	-	\$	22,541	
			ı	December 31	I, 201	15			
		Level 1		Level 2	L	_evel 3		Total	
Assets at fair value (in 000	's):				_		_		
Short-term investments	\$	11,190	\$	- ;	\$	-	\$	11,190	
Bonds		-		-		-		-	
Preferred stock		-		-		-		-	
Common stock		12,878		-		-		12,878	
Total assets at fair value	\$	24,068	\$	- ;	\$	-	\$	24,068	

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1 and 2. This policy also applies to transfers into or out of Level 3 as stated in paragraph 3 below.

During 2016, the Company had no transfers into or out of Level 3.

2. Rollforward of Level 3 Items

The Company has no material assets or liabilities measured at fair value in the Level 3 category.

3. Policy on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values

The Company has no assets or liabilities measured at fair value in the Level 3 category.

The Company's investments in bond and debt securities and preferred stock reported at fair value are classified in Level 2. Fair values of the investments reported in this category are provided by independent pricing services. Where independent pricing services provide fair values, the Company has obtained an understanding of the methods, models and inputs used in pricing and has controls in place to validate that the amounts provided represent current fair values.

Typical inputs to models used by independent pricing services include but are not limited to benchmark yields, reported trades, broker-dealer quotes, issuer spreads, benchmark securities, bids, offers, reference data, and industry and economic events. Because some preferred and common stocks do not trade daily, independent pricing services regularly derive fair values using recent trades of securities with similar features. When recent trades are not available, pricing models are used to estimate the fair values of securities by discounting future cash flows at estimated market interest rates.

- 5. The Company has no derivative assets or liabilities.
- B. Combination of Fair Value Information

Not applicable

C. Other Fair Value Disclosures

The following tables provide information as of December 31, 2016 and 2015 about the Company's financial assets and liabilities, including those measured at other than fair value in the Statements of Admitted Assets, Liabilities, and Policyholders' Surplus.

			Dece	mk	per 31, 201	6				
		Level 1	Level 2		Level 3		Aggregate Fair Value	-	Admitted Assets	Not racticable Carrying Value)
Assets at fair value (in 000's):	-			-		_				
Bonds and debt securities	\$	17,546 \$	309,013	\$	- \$	5	326,559	\$	318,521	\$ -
Short-term investments		5,733	-		-		5,733		5,733	-
Preferred stock		-	1,010		-		1,010		862	-
Common stock		16,463	-		-		16,463		16,463	-
Total assets at fair value	\$	39,742 \$	310,023	\$	- 9	§ _	349,765	\$	341,579	\$ -
		Level 1	Dece Level 2	mk	per 31, 201 Level 3	5	Aggregate		Admitted	Not
		Level	Level Z		Level 3		Fair Value	_	Assets	 racticable Carrying Value)
Assets at fair value (in 000's)	: -			_		_				
Bonds and debt securities	\$	23,473 \$	291,997	\$	- \$	5	315,470	\$	308,024	\$ -
Short-term investments		11,190	-		-		11,190		11,190	-
Preferred stock		-	1,059		-		1,059		862	-
Common stock		12,878	-		-		12,878		12,878	-
Total assets at fair value	\$	47,541 \$	293,056	\$	- 9	\$	340,597	\$	332,954	\$ -

D. Reasons Not Practical to Estimate Fair Values

Not applicable

- 21. Other Items
 - A. Unusual or Infrequent Items

B. Trouble Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

No securities other than those indicated in Schedule E Part 3 have been pledged as collateral.

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable Tax Credits

During 2016 and 2015 there were no transferable state tax credits.

- F. Subprime Mortgage Related Risk Exposure
 - 1. The Company's exposure to subprime lending is limited to investments within the fixed income investment portfolio which contains asset-backed securities that are backed by subprime loans. The Company believes its greatest exposure is to unrealized losses from declines in asset values rather than realized losses resulting from future defaults. The Company manages its subprime risk exposure by limiting its holdings in these types of securities, continuing its conservative investment guidelines, maintaining high credit quality investments, and performing ongoing analysis of its portfolio.
 - 2. Direct Exposure Mortgage Loans

Not applicable

- 3. Direct Exposures Other Investment Classes
 - a. Structured Securities

The values of structured securities in the investment portfolio with subprime exposure are as indicated below. These securities represent less than 1% of the total fixed income investment portfolio.

	Cost	Book/Adjusted Carrying Value	Fair Value	Other-Than- Temporary Impairments Recognized	Rating
Subprime/HELOC	\$271,707	\$287,920	\$301,669	-	B+/CCC-

4. Underwriting Exposure

Not applicable

G. Insurance-linked Securities

Not applicable

22. Events Subsequent

There were no events occurring subsequent to the end of the current year through the date of this filing meriting disclosure.

23. Reinsurance

A. Unsecured Reinsurance Recoverables

Unsecured reinsurance recoverable for losses, paid and unpaid including IBNR, loss adjustment expenses, and unearned premium in excess of 3% of the Company's policyholder surplus is as follows:

(000 omitted)

NAIC Code Federal ID# Name of Reinsurance Amount 22039 13-2673100 General Reinsurance Corp. \$27,697

B. Reinsurance Recoverables in Dispute

The Company has no reinsurance recoverable balances in dispute at December 31, 2016.

C. Reinsurance Assumed and Ceded and Protected Cells

All reinsurance premiums are paid on earned premium; therefore return commission is zero. At December 31, 2016, the unearned premium reserves for direct and assumed premiums were \$60,964,152 and \$3,047,453, respectively. The unearned premium reserves for ceded premiums was \$89,285 at December 31, 2016.

Certain ceded reinsurance contracts provide for additional or return contingent commission based on actual loss experience of the reinsured business. The annual contingent commission adjustment was settled during 2016 and there is no payable or receivable at December 31, 2016.

D. Uncollectible Reinsurance

None

E. Commutation of Ceded Reinsurance

The Company commuted one reinsurance contract during 2016 with General Reinsurance Corp. The Company recognized the amounts received from the reinsurer as a reduction to losses and direct cost containment (DCC) paid and reduced reserves to recognize the effect of releasing the reinsurer from its obligation under the contract. The net effect of the commutation was an increase in losses incurred and DCC incurred. This amount is shown below by Statement of Income classification:

Losses Incurred \$ 1,810,990 DCC Incurred <u>(7,253)</u> \$ 1,803,737

The gains or losses resulting from commutations are not recognized until the dates of final settlement between the Company and the reinsurer.

F. Retroactive Reinsurance

Part (1)

1.	Reserves Transferred: a. Initial Reserves b. Adjustments – Prior Yr. c. Adjustments – Current Yr. d. Current Total	(\$	ssumed (1,845,479) 38,630 27,605 (1,779,244)
2.	Consideration Paid or Received: a. Initial Consideration b. Adjustments – Prior Yr. c. Adjustments – Current Yr. d. Current Total	\$ \$	1,845,479 - - 1,845,479
3.	Paid Losses Reimbursed or Recovered: a. Prior Year b. Current Year c. Current Total	\$ \$	(11,774) 20,495 8,721
4.	Special Surplus from Retroactive Reinsurance: a. Initial Surplus Gain or Loss b. Adjustments – Prior Year c. Adjustments – Current Year d. Current Year Restricted Surplus e. Cumulative total Transferred to Unassigned Funds	\$	38,630 27,605 - 66,235

In 2016, the Company has no ceded retroactive reinsurance.

5. Insurers included in the above transactions:

Fairfield Insurance NAIC#44784 \$1,779,244

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Transfer of Property and Casualty Run-off Agreements

I. Certified Reinsurer Rating Downgraded

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Method Used to Estimate

The Company maintains a shared earnings program in support of its loss prevention and claim cost containment initiatives. Shared earnings are computed 18 months after policy inception based on an individual policy's incurred loss experience. These shared plans are estimated, accrued and accounted for as retrospectively rated policies.

B. Method Used to Record

The Company records the retrospective premium accruals as earned by adjusting unearned premiums. These amounts are not recorded as premiums written until they are billed to the policyholders. Return premiums are recorded as liabilities and additional premiums are recorded as assets.

C. Amount and Percent of Net Retrospective Premiums

See Schedule P - Part 7A

D. Medical Loss Ratio Rebates

Not applicable

E. Calculation of Nonadmitted Accrued Retrospective Premiums

Not applicable

F. Risk-Sharing Provisions of the Affordable Care Act (ACA)

Not applicable

25. Changes in Incurred Losses and Loss Adjustment Expenses

The estimated cost of loss and loss adjustment expenses attributable to insured events of prior years increased by \$11.8 million during 2016. Increases of this nature take place as the result of commutation of claims during the year, increased severity of claims within reinsurance retention levels, and the ongoing review of claim reserves as additional information becomes available.

26. Intercompany Pooling Arrangements

Not applicable

27. Structured Settlements

a. Reserves Released due to Purchase of Annuities

The Company has purchased annuities with the claimant as payee and has received a signed release from the claimant eliminating any future liability for the Company. The Company has released reserves of \$2,094,305 and \$3,427,213 through the purchase of annuities during 2016 and 2015, respectively.

b. Annuity Life Insurers with Balances due Greater than 1% of Policyholder's Surplus

Not applicable

28. Health Care Receivables

Not applicable

29. Participating Policies

30. Premium Deficiency Reserves

The Company anticipates investment income as a factor in the premium deficiency calculation in accordance with SSAP No. 53 - Property-Casualty Contract Premiums and was not required to record a premium deficiency reserve as of December 31, 2016.

31. High Deductibles

The Company has no High Deductible plans.

32. Discounting of Liabilities for Unpaid Losses and Unpaid Loss Adjustment Expenses

The Company does not discount unpaid losses and unpaid loss adjustment expenses.

33. Asbestos/Environmental Reserves

The likelihood of material liability related to asbestos and environmental loss is remote since reported claim activity levels are minimal and the Company does not write lines of business which are typically exposed to such losses. To-date, payments of \$825,840 have been made for 19 claims including denial and dismissal settlements and claim related expenses; there are currently no outstanding reserves.

34. Subscriber Savings Accounts

Not applicable

35. Multiple Peril Crop Insurance

Not applicable

36. Financial Guaranty Insurance

PART 1 - COMMON INTERROGATORIES

GENERAL

1.2	yes, complete Schedule Y, Parts 1, 1A and 2.		
; ;	yes, did the reporting entity register and file with its domiciliary State Insurance Comperintendent or with such regulatory official of the state of domicile of the princip system, a registration statement providing disclosure substantially similar to the state association of Insurance Commissioners (NAIC) in its Model Insurance Holding Cond model regulations pertaining thereto, or is the reporting entity subject to standardstantially similar to those required by such Act and regulations?	nal insurer in the Holding Company andards adopted by the National ompany System Regulatory Act	Yes[X] No[] N/A[]
1.3 \$	state Regulating?		Rhode Island
	las any change been made during the year of this statement in the charter, by-law ettlement of the reporting entity?	vs, articles of incorporation, or deed	of Yes[]No[X]
2.2	yes, date of change:		
3.1 \$	tate as of what date the latest financial examination of the reporting entity was ma	ade or is being made.	12/31/2015
t	tate the as of date that the latest financial examination report became available for ne reporting entity. This date should be the date of the examined balance sheet a completed or released.		12/31/2011
t	tate as of what date the latest financial examination report became available to ot ne state of domicile or the reporting entity. This is the release date or completion of the date of the examination (balance sheet date).	•	12/04/2012
]	y what department or departments? Department of Business Regulation, State of Rhode Island		
	lave all financial statement adjustments within the latest financial examination repubsequent financial statement filed with departments?	ort been accounted for in a	Yes[] No[] N/A [X]
3.6 I	lave all of the recommendations within the latest financial examination report beer	n complied with?	Yes[] No[] N/A [X]
3	during the period covered by this statement, did any agent, broker, sales represent ales/service organization or any combination thereof under common control (other eporting entity) receive credit or commissions for or control a substantial part (mor f business measured on direct premiums) of: 4.11 sales of new	r than salaried employees of the re than 20 percent of any major line	Yes[] No[X]
	4.12 renewals?		Yes[] No[X]
1	during the period covered by this statement, did any sales/service organization ow eporting entity or an affiliate, receive credit or commissions for or control a substarror major line of business measured on direct premiums) of:		
	4.21 sales of new 4.22 renewals?	w business?	Yes[] No[X] Yes[] No[X]
5.1 l	las the reporting entity been a party to a merger or consolidation during the period	d covered by this statement?	Yes [] No [X]
5.2	yes, provide the name of the entity, NAIC Company Code, and state of domicile (·	
	1	2	3
	Name of Entity	NAIC Company Code	State of Domicile

6.1	Has the report if applicable) s	Y	Yes[]No[X]				
6.2	.2 If yes, give full information:						
7.1	Does any forei	gn (non-United States) person or entity directly or ind	irectly control 10% or more of the reporting	entity?	Y	es[] No[]	x]
7.2	If yes,						
	7.21 7.22	State the percentage of foreign control. State the nationality(s) of the foreign person(s)	or entity(s); or if the entity is a mutual or		_		
		1	2				
		Nationality	Type of Entity				
8 1	Is the company	y a subsidiary of a bank holding company regulated b	v the Federal Reserve Board?			es[] No[]	X 1
					•		.1
8.2	If response to	8.1 is yes, please identify the name of the bank holdir	ng company.				
8.3	Is the company	y affiliated with one or more banks, thrifts or securities	s firms?		Y	es[] No[]	X]
	If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.						
	1		2	3	4	5	6
		Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
9.	conduct the ar	me and address of the independent certified public ad inual audit? se Coopers, LLP; 185 Asylum Street, Suite 2400; Har	-				
10.1	public account	r been granted any exemptions to the prohibited non- ant requirements as allowed in Section 7H of the Ann substantially similar state law or regulation?			Y	es[] No[]	X]
10.2	If response to	10.1 is yes, provide information related to this exempt	ion:				
10.3		r been granted any exemptions related to the other reion as allowed for in Section 18A of the Model Regula		-	Y	es[] No[]	X]
10.4	If response to	10.3 is yes, provide information related to this exempt	ion:				

10.5	Has the reporting entity established an Audit Committee in compliance with the domiliciary state insurance laws?	Yes [X] No [] N/A []
10.6	If the response to 10.5 is no or n/a, please explain.	
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant	
	associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Yi Jing, Willis Towers Watson; 175 Powder Forest Drive, Weatogue, CT 06089-9658	
	11 Jing, Willis Towers Walson, 173 Fowder Folest Drive, Wealtogue, CT 00003-3030	
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes[] No[X]
	12.11 Name of real estate holding company	
	12.12 Number of parcels involved	
	12.13 Total book/adjusted carrying value	\$
12.2	If yes, provide explanation:	
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:	
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?	
	N/A	
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on	
	risks wherever located?	Yes[] No[X]
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes[] No[X]
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes[] No[] N/A [X]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following	
	standards? a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between	
	personal and professional relationships; b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting	
	entity; c. Compliance with applicable governmental laws, rules, and regulations;	
	d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and	
	e. Accountability for adherence to the code.	Yes [X] No []
4.11	If the response to 14.1 is no, please explain:	
14.2	Has the code of ethics for senior managers been amended?	Yes[] No[X]
4.21	If the response to 14.2 is yes, provide information related to amendment(s).	

1.3 Have any provisions of the code of ethic	s been waived for any of the sp	ecified officers?	Yes[]No[X]
31 If the response to 14.3 is yes, provide the	e nature of any waiver(s).		
			•
			•
1 Is the reporting entity the beneficiary of a	Letter of Credit that is unrelate	ed to reinsurance where the issuing or	
confirming bank is not on the SVO Bank			Yes[]No[X]
2 If the response to 15.1 is yes, indicate th	e American Bankers Association	on (ABA) Routing Number and the name of the	
issuing or confirming bank of the Letter of	of Credit and describe the circuit	mstances in which the Letter of Credit	
is triggered.			
1	2	3	4
American			
Bankers			
Association	Issuing or Confirming		
(ABA) Routing Number	Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
	BOAR	RD OF DIRECTORS	
6. Is the purchase or sale of all investments	s of the reporting entity passed	upon either by the board of directors or	
a subordinate committee thereof?			Yes[X] No[]
7. Does the reporting entity keep a complet	te permanent record of the proc	ceedings of its board of directors and all	
subordinate committees thereof?			Yes[X] No[]
8. Has the reporting entity an established p	rocedure for disclosure to its bo	pard of directors or trustees of any material	
interest or affiliation on the part of any of	its officers, directors, trustees	or responsible employees that is in conflict or	
is likely to conflict with the official duties	of such person?		Yes[X] No[]
		FINANCIAL	
9. Has this statement been prepared using	a basis of accounting other tha	n Statutory Accounting Principles (e.g.,	
Generally Accepted Accounting Principle	es)?		Yes[]No[X]
1 Total amount loaned during the year (inc	clusive of Separate Accounts, e	xclusive of policy loans):	
	20.11	To directors or other officers	\$
	20.12	To stockholders not officers	\$ \$
	20.13	Trustees, supreme or grand (Fraternal only)	\$
.2 Total amount of loans outstanding at the	end of year (inclusive of Separ	rate Accounts, exclusive of policy loans):	
ű		To directors or other officers	\$
		To stockholders not officers	\$
		Trustees, supreme or grand (Fraternal only)	\$
	20.20		*
.1 Were any assets reported in this stateme	ent subject to a contractual obli	gation to transfer to another party without the	
liability for such obligation being reported	•	~	Yes[]No[X]
,, and an animal points			
2 If yes, state the amount thereof at Decer	mber 31 of the current vear:		
,,	•	Rented from others	\$
		Borrowed from others	\$
		Leased from others	\$\$
	21.23		\$ \$
	21.24	Othor	Ψ
1 Dogs this statement include normants for	or accessments as described in	the Annual Statement Instructions other than	
guaranty fund or guaranty association as		and Annual Statement Instructions Office (IIdf)	Yes [] No [X]
guaranty lund of guaranty association as	99099111011109!		ו בשנן ואט [7]

22.2	If answer is yes:		
	22.	21 Amount paid as losses or risk adjustment	\$
	22.	22 Amount paid as expenses	\$
	22.	23 Other amounts paid	\$
22.1	Does the reporting entity report any amounts due from parent, subs	idiarias or affiliatos on Paga 2 of this	
20.1	statement?	idialies of animates on rage 2 of this	Yes [X] No []
23.2	If yes, indicate any amounts receivable from parent included in the	Page 2 amount:	\$
		INVESTMENT	
24.01	Were all the stocks, bonds and other securities owned December 3	1 of current year, over which the reporting entity has	
	exclusive control, in the actual possession of the reporting entity on	said date? (other than securities lending programs	
	addressed in 24.03)		Yes[X] No[]
24.02	If no, give full and complete information, relating thereto:		
24.03	For security lending programs, provide a description of the program	including value for collateral and amount of loaned	
	securities, and whether collateral is carried on or off-balance sheet.	(an alternative is to reference Note 17 where this	
	information is also provided) N/A		
	······································		
24.04	Does the company's security lending program meet the requirement	ts for a conforming program as outlined in the	V
	Risk-Based Capital Instructions?		Yes[] No[] N/A [X]
4.05	If answer to 24.04 is yes, report amount of collateral for conforming	programs.	\$
24.06	If answer to 24.04 is no, report amount of collateral for other progra	ms	\$
4.00	in answer to 24.04 is no, report amount or conateral for other progra		\$
4.07	Does your securities lending program require 102% (domestic secu	rities) and 105% (foreign securities) from the	
	counterparty at the outset of the contract?		Yes[] No[] N/A [X]
24.08	Does the reporting entity non-admit when the collateral received fro	m the counterparty falls below 100%?	Yes[] No[] N/A [X]
24.09	Does the reporting entity or the reporting entity's securities lending	agent utilize the Master Securities Lending	
	Agreement (MSLA) to conduct securities lending?		Yes[] No[] N/A [X]
4.10	For the reporting entity's security lending program, state the amoun	t of the following as of December 31 of the current year:	
	24.101 Total fair value of reinvested collateral assets reported on	Schedule DL, Parts 1 and 2	\$
	24.102 Total book adjusted/carrying value of reinvested collateral	assets reported on Schedule DL, Parts 1 and 2	\$
	24.103 Total payable for securities lending reported on the liability	page	\$
25.1	Were any of the stocks, bonds or other assets of the reporting entity	owned at December 31 of the current year not	
	exclusively under the control of the reporting entity or has the report		
	a put option contract that is currently in force? (Exclude securities s	subject to Interrogatory 21.1 and 24.03).	Yes[X] No[]

Yes[X] No[]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21	Subject to repurchase agreements	Φ	
25.22	Subject to reverse repurchase agreements	\$	
25.23	Subject to dollar repurchase agreements	\$	
25.24	Subject to reverse dollar repurchase agreements	\$	
25.25	Placed under option agreements	\$	
25.26	Letter stock or securities restricted as to sale -		
	excluding FHLB Capital Stock	\$	
25.27	FHLB Capital Stock	\$	
25.28	On deposit with states	\$	839,084
25.29	On deposit with other regulatory bodies	\$	400,000
25.30	Pledged as collateral - excluding collateral		
	pledged to an FHLB	\$	21,498,159
25.31	Pledged as collateral to FHLB - including		
	assets backing funding agreements	\$	
25.32	Other	\$	

25.3 For category (25.26) provide the following:

Ī	1	2	3
L	Nature of Restriction	Description	Amount
Ī			
İ			
1			

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes[]No[X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.

Yes[] No[] N/A [X]

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes[]No[X]

27.2 If yes, state the amount thereof at December 31 of the current year.

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes[X] No[]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1	2		
Name of Custodian(s)	Custodian's Address		
Bank of America	100 Federal Street, Boston, MA 02110		

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1	2	3
Name(s)	Location(s)	Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes[]No[X]

28.04 If yes, give full and complete information relating thereto:

	1	2	3	4
	Old Custodian	New Custodian	Date of Change	Reason
1				

28.05 Investment management - Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["... that have access to the investment accounts"; "...handle securities"]

1	2
Name Firm or Individual	Affiliation
New England Asset Management	U

28.059 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets?

Yes[X] No[]

28.059 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes[X] No[]

28.06 For those firms or individuals listed in the table 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
	Central Registration	Legal Entity		Investment Management
Name Firm or Individual	Depository Number	Identifier (LEI)	Registered With	Agreement (IMA) Filed
New England Asset Management	105900	KUR85E5PS4GQFZTFC130	Securities Exchange Commission	NO

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D – Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes[]No[X]

29.2 If yes, complete the following schedule:

1	2	3	
CUSIP#	Name of Mutual Fund	Book/Adjusted Carrying Value	
29.2999 TOTAL			

 $29.3\,$ For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual Fund's	
Name of Mutual Fund	Name of Significant Holding	Book/Adjusted Carrying Value	
(from above table)	of the Mutual Fund	Attributable to the Holding	Date of Valuation

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
			Excess of Statement
			over Fair Value (-),
	Statement (Admitted)		or Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds	324,254,983	332,292,452	8,037,469
30.2 Preferred stocks	861,800	1,010,000	148,200
30.3 Totals	325,116,783	333,302,452	8,185,669

	30.3 Tot	als	325,116,783	333,302,452	8,185,669	
30.4	Fair values	have not been obtaine	utilized in determining the fair values: d from brokers/custodians; pricing has been rp, Reuters, S&P and Bloomberg	obtained from pricing	services such as Merrill	
31.1	Was the ra	te used to calculate fair	value determined by a broker or custodian	for any of the securities	s in Schedule D?	Yes[]No[X]
31.2			he reporting entity have a copy of the broke nic copy) for all brokers or custodians used			Yes [] No []
31.3			e the reporting entity's process for determin of fair value for Schedule D:	ing a reliable pricing		
32.1	Have all the followed?	e filing requirements of	the Purposes and Procedures Manual of the	e NAIC Investment Ana	lysis Office been	Yes[X] No[]
32.2	If no, list ex	cceptions:		THER		
33.1	Amount of	payments to trade asso	ciations, service organizations and statistica	al or Rating Bureaus, if	any?	\$650,356_
33.2	total payme	=	and the amount paid if any such payment repairs, service organizations and statistical or ra			
			1		2	
		NCCI	Name	\$	Amount Paid 622,6	52
34.1	Amount of	payments for legal expe	enses, if any?			\$79,926_
34.2			mount paid if any such payment represented g the period covered by this statement.	d 25% or more of the to	otal	
			1		2	7
			Name		Amount Paid	
		Partridge Snow & Hal	nn, LLP	\$	67,71	7

80,000

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments

of government, if any?

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
Roberts, Carroll, Feldstein & Peirce	\$ 50,000
Government Strategies, Inc.	\$ 25,000
	\$

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

	1.1 Doe	s the reporting entity have any direct Med	dicare Sup	element Insurance in force?	Yes [] No [X]
1.31 Reason for excluding 1.41 Indicates amount of earned premium attributable to Canadian andor Other Alien not included in Item (1.2) above. 5.51 Indicates tool incurred claims on all Medican Supplement incurrous. 5.52 Indicates tool incurred claims on all Medican Supplement incurrous. 5.53 Indicates tool incurred claims 1.54 Indicates amount of earned premium attributable to Canadian andor Other Alien not included in Item (1.2) above. 5.54 Indicates tool incurred claims 1.55 Indicates tool incurred delines 1.56 Indicates on Current Price years: 1.57 Indicates on Current Price years: 1.58 Indicates on Current Price years: 1.59 Indicates on Current Price years: 1.50 Indicates on Current Price years: 1.57 Total incurred delines 1.57 Total incurred delines 1.57 Total incurred delines 1.58 Indicates on Current Price years: 1.58 Indicates on Current Price years: 1.59 Indicates on Current Price years: 1.50 Total incurred delines 1.50 Total incurred delines 1.50 Total incurred delines 1.57 Total incurred delines 1.58 Indicates on Current Price years: 2.5 Permitter Noted price years: 2.6 Permitter Noted Carrent Price years: 2.7 Permitter Noted Carrent Price years: 2.8 Permitter Noted Carrent Price years: 2.9 Permitter Noted Carrent Price years: 2.1 Permitter Noted Carrent Price years: 2.1 Permitter Noted Carrent Price years: 2.2 Permitter Noted Carrent Price years: 2.3 Permitter Noted Carrent Price years: 2.4 Permitter Noted Carrent Price years: 2.5 Permitter Noted Carrent Price years: 2.6 Research Read Carrent Price years: 2.7 Permitter Noted Carrent Price years: 2.8 Permitter Noted Carrent Price years: 2.9 Permitter Noted Carrent Price years: 2.1 Permitter Noted Carrent Price years: 2.2 Permitter Noted Carrent Price years: 2.3 Permitter Noted Carrent Price years: 2.4 Permitter Noted Carrent Price years: 2.5 Permitter Noted Carrent Price years: 2.6 Permitter Noted Carrent Price years: 2.7 Permitter Noted Carrent Price years: 2.8 Permitter Noted Carrent Price years: 2.9	1.2 If ye	s, indicate premium earned on U.S. busin	ness only.		\$
1.4 Indicate amount of earned premium attributable to Canadian ancibr Other Allen not included in Item (12) above. \$			the Medica	re Supplement Insurance Experience Exhibit?	\$
1.5 Indicated belief incurred dains on all Medicare Supplement murance. Section					
1.5 Indicated belief incurred dains on all Medicare Supplement murance. Section					
Most current three years:		•		· ·	\$ \$
1.161 Total premium earned 1.162 Total incursed claims 1.163 Number of covered lives All years prior to most current three years: 1.164 Total premium earned 1.165 Total premium earned 1.165 Total premium earned 1.165 Total premium earned 1.165 Total premium earned 1.166 Total premium earned 1.176 Total premium earned 1.177 Total premium earned 1.178 Total premium earned 1.179 Total premium earned 1.171 Total premium earned 1.171 Total premium earned 1.172 Total premium earned 1.173 Total premium earned 1.174 Total premium earned 1.175 Total incursed claims 1.175 Number of covered lives 1.176 Total premium earned 1.177 Total incursed claims 1.176 Number of covered lives 1.176 Total premium earned 1.177 Total incursed claims 1.176 Number of covered lives 1.176 Total premium earned 1.177 Total incursed claims 1.177 Total incursed claims 1.178 Number of covered lives 1.179 Total incursed claims 1.179 Total incursed claims 1.170 Number of covered lives 1.171 Total incursed claims 1.175 Number of covered lives 1.176 Number of covered lives 1.177 Total incursed claims 1.177 Number of covered lives 1.178 Total premium earned 1.179 Total incursed claims 1.179 Number of covered lives 1.179 Total premium earned 1.179 Total premium earned 1.170 Number of covered lives 1.170 Number of covered lives 1.177 Total incursed claims 1.178 Number of covered lives 1.179 Total premium earned 1.179 Number of covered lives 1.179 Total premium earned 1.179 Number of covered lives 1.170 Number of covered li			Сарріотіо	K moditation.	Ψ
1.62 Total incurred claims \$					
All years prior to most current three years: 1.64 Total premium served (res) 1.75 Total premium served (res) 1.76 Total premium served (res) 1.77 Group policies: Most current three years: 1.78 Total premium served (res) 1.79 Total premium served (res) 1.70 Total premium served (res) 1.71 Total premium served (res) 1.72 Total numered claims 1.73 Number of covered lives 1.74 Total premium served (res) 1.74 Total premium served (res) 1.74 Total premium served (res) 1.75 Total incurred claims 1.76 Number of covered lives 1.77 Total premium served (res) 1.78 Total incurred claims 1.79 Total incurred claims 1.79 Total premium served (res) 1.70 Premium Numerator 2.1 Premium Numerator 2.2 Premium Denominator 2.3 Premium Resio (2.1 v. 2.2) 2.4 Reserve Numerator 2.5 Reserve Numerator 2.6 Reserve Numerator 2.7 Reserve Numerator 3.8 Total incurred claims 3.1 Does the reporting entity issue both participating and non-participating policies? 4. For Mutual reporting entity issue assessable policies? 5. For Reciprocal Exchanges Only: 4. For Reciprocal Exchanges Only: 5. For Reciprocal Exchanges Only: 5. So Reserved Exchange are not paid out of the compensation of the Attorney-in-fact? 5. If yes, give full information					\$
1.6.4 Total premium eamed 1.6.5 Total incurred claims 1.6.5 Number of covered lives 1.7. Group policies: Most current three years: 1.7.1 Total premium eamed \$ \$ \$ \$ \$ \$ \$ \$ \$					\$
1.6.5 Total incurred daims 1.6.6 Number of covered lives Most current firre years:			All yea		
Most current three years: Most current three years: 171 Total prenium earned					\$
Most current three years: 1.71 Total premium earned 1.72 Total premium earned 1.73 Number of covered lives All years prior to nost current three years: 1.74 Total incurred claims 1.75 Total incurred claims 1.76 Number of covered lives 1.76 Number of covered lives 2. Health Test: 2. Health Test: 2. Health Test: 2. Health Test: 2. Premium Demoniantor 2. 1 Premium Demoniantor 2. 2 Premium Demoniantor 3. 1 Premium Park State St					\$
Most current tree years: 1,71 Total premium earned 1,72 Total premium earned 1,73 Number of covered lives All years prior to nost current tree years: 1,74 Total premium earned 1,75 Total incurred claims 1,76 Total incurred claims 1,76 Number of covered lives 2,1 Premium Ramed 1,76 Number of covered lives 2,1 Premium Ramed 2,2 Premium Banko (2,11,2.2) 2,3 Premium Ramed 2,3 Premium Ramed 2,4 Reserve Numerator 2,5 Reserve Denominator 2,5 Reserve Denominator 2,6 Reserve Denominator 3,2 Premium Ramed 2,6 Reserve Denominator 3,2 Premium Ramed 3,2 Premium Ramed 3,2 Premium Ramed 3,3 Premium Ramed 3,4 Premium Ramed 3,4 Premium Ramed 3,5 Premium Ramed 3,5 Premium Ramed 3,5 Premium Ramed 3,5 Premium Ramed 3,6 Premium Ramed 3,7 Pr	1.7 Grou	up policies:	1.00	Number of Covered lives	
All years prior to most current three years: 1.74 Total premium earned All years prior to most current three years: 1.75 Total incurred claims 1.76 Number of covered lives 2. Health Test: 2. Health Test: 2. Health Test: 2. Premium Pathology 1 1/2 2 2. Pathology 1 1/2 2 2. Pathology 1 1/2 2 2. Premium Pathology 1 1/2 2 2. Patho			Most	urrent three years:	
All years pirot no most current three years: All years pirot no most current three years: 1.74 Total premium earned 1.75 Number of covered lives 2. Health Test: 2. Health Test: 2. Premium Numerator 2. Premium Numerator 3. Premium Ralo (2.1 / 2.2) 3. Premium Band (2.1 / 2.2) 4. Reserve Numerator 2. Premium Band (2.1 / 2.2) 5. Reserve Patro (2.4 / 2.5) 3.1 Does the reporting entity issue both participating and non-participating policies? 3.1 Participating policies? 3.2 Premium Band (2.4 / 2.5) 3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If year premiums written on: 3.2.1 Participating policies? 3.2.2 Non-participating policies 3.2.2 Non-participating policies 4. For Mutual reporting entity issue assessable policies? 4. For Mutual reporting entity issue on-assessable policies? 4. For Mutual reporting entity issue on-assessable policies? 4. For Mutual reporting entity issue on-assessable policies? 5. For Reciprocal Exchanages Only. 5. For Reciprocal Exchanages Only. 5. For Reciprocal Exchanages 5. For Reciprocal Exchanages 5. Premium David Mutual Reporting entity issue does not ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanages 5. For Reciprocal Exchanages 5. Premium David Mutual Reporting entity issue does not report in fulfillment of certain conditions, been deferred? 5. Was a provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:				Total premium earned	\$
All years prior to most current three years: 1.74 Total premium earned 1.75 Total incurred claims 1.76 Number of covered lives 1.76 Number of covered lives 1.77 Courrent Year 2.1 Premium Denominator 2.2 Premium Denominator 3.2 Premium Beato (2.1 / 2.2) 2.3 Premium Beato (2.1 / 2.2) 2.4 Reserve Numerator 2.5 Reserve Denominator 2.6 Reserve Denominator 2.7 Premium Beato (2.1 / 2.2) 3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the amount of calendar year premiums withen on: 3.2 If yes, state the protring entity issue assessable policies? 4. For Mutual reporting entity issue assessable policies? 4. For Mutual reporting entity issue assessable policies? 5. For Reciprocal Exchanges Only: 5. If yes, is the commission paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5. If yes is the commission paid. 5. If yes is the commission paid or offered to be paid during the year on deposit notes or contingent premiums. 5. If yes is the commission paid. 5. If yes is the commission paid or offered to be paid during the year on deposit notes or contingent premiums. 5. If yes is the commission paid information of the Attorney-in					\$
1.74 Total premium earned 1.75 Total incurred claims S S S S S S S S S			1./3	Number of covered lives	
1.75 Total incurred claims 1.76 Number of covered lives 2. Health Test: 3. Premium Rumariator 2. Premium Penominator 3. 132,407,436 3. 127,217,017 2. Premium Rumariator 3. 132,407,436 3. 127,217,017 2. Premium Rumariator 3. 12 Premium Rumariator 3. 12 Premium Rumariator 3. 12 Penominator 3. 12 Penomina			•	· ·	•
2. Health Test: 1.76 Number of covered lives 2.1 Premium Numerator 3 2.1 Premium Numerator 3 3 127,217,017					\$
2. Health Test: 2.1 Premium Numerator 2.2 Premium Seminator 3.1 Premium Seminator 3.2 Premium Remotio (2.1 / 2.2) 4. Reserve Numerator 3.2 Premium Remotio (2.1 / 2.2) 5. Reserve Demonitrator 3.2 Feminator 3.2 Seminator 3.3 Does the reporting entity issue both participating and non-participating policies? 3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If yes, state the amount of calendar year premiums written on: 3.2.1 Participating policies 3.2.2 Non-participating policies 3.2.2 Non-participating policies 4. For Mutual reporting entity issue assessable policies? 4. For Mutual reporting entity issue assessable policies? 4. Does the reporting entity issue non-assessable policies? 4. Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5. Does the exchange appoint local agents? 5. For Reciprocal Exchanges Only: 5. Does the exchange appoint local agents? 5. So Reserves of the Exchange are not paid out of the compensation of the Attorney's-in-fact compensation 5. So Reserves of the Exchange are not paid out of the compensation of the Attorney's-in-fact? 5. What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5. If yes, give full information nd excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					Ψ
2.1 Premium Numerator \$ \$ 132,407,436 \$ 127,217,017	2. Hea	Ith Test:			
2.2 Premium Ratio (2.1 / 2.2) 2.3 Premium Ratio (2.1 / 2.2) 2.4 Reserve Numerator \$ \$ 132,407,436 \$ 200,796,168 2.5 Reserve Numerator \$ \$ 215,800,099 \$ 200,796,168 3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If yes, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, state the amount of calendar year premiums written on: 3.2 If year, is the reporting entity issue accessable policies? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5. For Reciprocal Exchanges Only: 5. If year, is the commission paid: 5. If year, is the commission paid out of the compensation of the Attorney-in-fact? 5. If year, is the commission paid out of the compensation of the Attorney-in-fact? 5. If year, is year, if year,					
2.3 Premium Ratio (2.1 / 2.2) 2.4 Reserve Numerator \$ \$					
2.4 Reserve Numerator \$ 2.5 Reserve Denominator \$ 215,800,099 \$ 200,796,168 \$ 200,796,				· · · · · · · · · · · · · · · · · · ·	<u>'</u>
2.5 Reserve Denominator 2.6 Reserve Ratio (2.4 / 2.5) 3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If yes, state the amount of calendar year premiums written on: 3.2.1 Participating policies 3.2.2 Non-participating policies 3.2.2 Non-participating policies 4. For Mutual reporting entities and Reciprocal Exchanges only: 4.1 Does the reporting entity issue assessable policies? 4.2 Does the reporting entity issue assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5. 1 Does the exchange appoint local agents? 5. 21 Out of Attorney's-in-fact compensation 5. 22 As a direct expense of the exchange 7 Yes [] No [] N/A [X] 7 Yes [] No [] N/A [X] 5. 24 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X] 5. If yes, give full information					_
3.1 Does the reporting entity issue both participating and non-participating policies? 3.2 If yes, state the amount of calendar year premiums written on: 3.2.1 Participating policies 3.2.2 Non-participating policies \$			2.5	Reserve Denominator \$ 215,800,099 \$ 200,796,160	3
3.2 If yes, state the amount of calendar year premiums written on: 3.21 Participating policies 3.22 Non-participating policies 3.22 Non-participating policies 3.24 For Mutual reporting entities and Reciprocal Exchanges only: 4. For Mutual reporting entity issue assessable policies? 4. Does the reporting entity issue assessable policies? 4. Does the reporting entity issue non-assessable policies? 4. Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 6. Does the exchange appoint local agents? 5. 21 Out of Attorney's-in-fact compensation 7 Yes [] No [] N/A [X] 8. As a direct expense of the exchange 7 Yes [] No [] N/A [X] 8. As any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 8. Yes [] No [X] 8. As any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 9 Yes [] No [X]			2.6	Reserve Ratio (2.4 / 2.5)	_
3.21 Participating policies 3.22 Non-participating policies \$	3.1 Doe	s the reporting entity issue both participa	iting and no	n-participating policies?	Yes[]No[X]
3.22 Non-participating policies 4. For Mutual reporting entities and Reciprocal Exchanges only: 4.1 Does the reporting entity issue assessable policies? 4.2 Does the reporting entity issue non-assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 6.1 Does the exchange appoint local agents? 6.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 5.22 As a direct expense of the exchange 7 Yes [] No [] N/A [X] 5.23 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 6.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 7 Yes [] No [X] 8 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 8 Yes [] No [X]	3.2 If ye	s, state the amount of calendar year prer	miums writt	en on:	
3.22 Non-participating policies 4. For Mutual reporting entities and Reciprocal Exchanges only: 4.1 Does the reporting entity issue assessable policies? 4.2 Does the reporting entity issue non-assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 6.1 Does the exchange appoint local agents? 6.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 5.22 As a direct expense of the exchange 7 Yes [] No [] N/A [X] 5.23 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 6.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 7 Yes [] No [X] 8 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 8 Yes [] No [X]			3.21	Participating policies	\$
4. For Mutual reporting entities and Reciprocal Exchanges only: 4.1 Does the reporting entity issue assessable policies? 4.2 Does the reporting entity issue non-assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 6.1 Does the exchange appoint local agents? 6.2 If yes, is the commission paid: 6.2 If yes, is the commission paid out of Attorney's-in-fact compensation 6.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 6.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 6.5 If yes, give full information 6.6 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					\$
4.1 Does the reporting entity issue assessable policies? 4.2 Does the reporting entity issue non-assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 6.1 Does the exchange appoint local agents? 6.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 7 yes [] No [] N/A [X] 5.22 As a direct expense of the exchange 7 yes [] No [] N/A [X] 8 yes [] No [X] 9 yes [4 For	Mutual reporting entities and Reciprocal			·
4.2 Does the reporting entity issue non-assessable policies? 4.3 If assessable policies are issued, what is the extent of the contingent liability of the policyholders? 4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5.1 Does the exchange appoint local agents? 6.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 7 Exc [] No [] N/A [X] 5.22 As a direct expense of the exchange 7 Exc [] No [] N/A [X] 8.1 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 8.2 If yes, give full information			•		1 X 1 0 M 1 2 9 Y
4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5.1 Does the exchange appoint local agents? 5.2 If yes, is the commission paid: 5.2.1 Out of Attorney's-in-fact compensation 5.2.2 As a direct expense of the exchange 7. Yes []No []N/A[X] 7. Yes []No []N/A[X] 7. Yes []No []N/A[X] 7. Yes []No []N/A[X] 8. Yes []No [X] 8. Yes []No [X]					
4.4 Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. 5. For Reciprocal Exchanges Only: 5.1 Does the exchange appoint local agents? 5.21 Out of Attorney's-in-fact compensation 5.22 As a direct expense of the exchange 7es []No []N/A [X] 5.23 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 7es []No [X]		, •	•		
5. For Reciprocal Exchanges Only: 5.1 Does the exchange appoint local agents? 5.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 5.22 As a direct expense of the exchange 7es [] No [] N/A [X] 5.23 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 7es [] No [X]		·			%
5.1 Does the exchange appoint local agents? 5.21 Out of Attorney's-in-fact compensation 5.21 Out of Attorney's-in-fact compensation 5.22 As a direct expense of the exchange 7es [] No [] N/A [X] 5.23 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 7es [] No [] N/A [X] 7es [] No [] N/A [X] 7es [] No [] N/A [X] 7es [] No [X] 7es [] No [X] 7es [] No [X]			d to be paid	during the year on deposit notes or contingent premiums.	\$
5.2 If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation 7es [] No [] N/A [X] 5.22 As a direct expense of the exchange 7es [] No [] N/A [X] 7es [] No [X] 7es [] No [X] 7es [] No [X] 7es [] No [X]		,			
5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A [X] 5.22 As a direct expense of the exchange Yes [] No [] N/A [X] 5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [] N/A [X]	5.1 Doe	s the exchange appoint local agents?			Yes[]No[X]
5.22 As a direct expense of the exchange Yes [] No [] N/A [X] 5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X] 5.5 If yes, give full information 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:	5.2 If ye	s, is the commission paid:			
5.3 What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? 5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? 5.5 If yes, give full information 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:			5.21	Out of Attorney's-in-fact compensation	Yes[]No[]N/A[X]
5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X] 5.5 If yes, give full information 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:			5.22	As a direct expense of the exchange	Yes[]No[]N/A[X]
5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X] 5.5 If yes, give full information 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:	5.3 Wha	t expenses of the Exchange are not paid	d out of the	compensation of the Attorney-in-fact?	
5.4 Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? Yes [] No [X] 5.5 If yes, give full information 6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					
5.5 If yes, give full information6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					
5.5 If yes, give full information6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					
6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:	5.4 Has	any Attorney-in-fact compensation, conti	ingent on fu	Ifillment of certain conditions, been deferred?	Yes [] No [X]
6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:	5.5 If ye	s, give full information			
6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit loss:					
compensation contract issued without limit loss:					••
				itself from an excessive loss in the event of a catastrophe under a workers'	
		•		n treaties as well as catastrophe coverage which provides additional protection.	

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures

	comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process: N/A. The Company is a monoline workers' compensation carrier.	
	What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?	
	Property insurance is not written	
	Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?	Yes[X]No[]
	If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss	
	Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?	Yes[]No[X]
7.2	If yes, indicate the number of reinsurance contracts containing such provisions.	
7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes[]No[]
	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes [X]No[]
	If yes, give full information In 2002, 25 GenRe Insurance claims were capped at \$5,532,533 in the aggregate. Of the 25 capped claims, 23 are closed and will not have an impact on losses. Additionally, reinsurance claims with GenRe for the policy years 7/1/2003-6/30/2004, 7/1/2004-6/30/2005, 7/1/2005-6/30/2006, 7/1/2007-6/30/2008, and 7/1/2008-6/30/2009 have been commuted.	
	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement	
	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes [] No [X] Yes [] No [X]
	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.	
	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes[]No[X]
	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.	
	 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) The entity does not utilize reinsurance; or, (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. 	Yes [] No [X] Yes [] No [X] Yes [] No [X]

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

]

]

	to that v	which the original	entity would have been requ	ired to charge had it reta	ned the risks. Has this	been done?		Yes [X] No [] N/A
		reporting entity q	guaranteed policies issued b on	y any other entity and nov	v in force:			Yes [] No [X]
12.1		porting entity rec	orded accrued retrospective gliabilities recorded for:					
		or component	12	.11 Unpaid losses				\$
			12	.12 Unpaid underwriting	expenses (including los	s adjustment expenses	5)	\$
12.2	Of the a	amount on Line 1	5.3, Page 2, state the amour	t that is secured by letter	s of credit, collateral ar	d other funds?		\$
12.3			derwrites commercial insurar ds covering unpaid premiums		compensation, are pr	emium notes or promis	sory notes	Yes[]No[X]N/A
12.4	If yes, p	provide the range		der such notes during the 41 From 42 To	period covered by this	statement:		
12.5	promiss	sory notes taken l	ollateral and other funds rece by a reporting entity or to sec tible features of commercial	ure any of the reporting e	, ,			Yes[]No[X]
12.6	If yes, s	state the amount	thereof at December 31 of cu	irrent year:				
				.61 Letters of Credit .62 Collateral and other t	iunde			\$
12 1	Largost	not aggregate a						¢
			mount insured in any one risl					Ψ
13.2		ny reinsurance co ement provision?	ontract considered in the calc	ulation of this amount inc	lude an aggregate limit	of recovery without als	o including a	Yes[]No[X]
			surance contracts (excluding ligatory contracts) considere			ng facultative programs	s, automatic	
14.1	Is the c	ompany a cedant	t in a multiple cedant reinsura	ance contract?				Yes[]No[X]
14.2	If yes, p	olease describe th	ne method of allocating and r	ecording reinsurance am	ong the cedants:			
14.3	If the ar		res, are the methods describe	ed in item 14.2 entirely co	ntained in the respectiv	e multiple cedant reins	urance	Yes [] No []
14.4	If the ar	nswer to 14.3 is n	no, are all the methods descri	bed in 14.2 entirely conta	ined in written agreem	ents?		Yes[]No[]
14.5	If the ar	nswer to 14.4 is n	no, please explain:					
15.1	Has the	reporting entity	guaranteed any financed pre	mium accounts?				Yes[]No[X]
15.2	If yes, g	give full information	on					
			write any warranty business wing information for each of the		anty coverage:			Yes[]No[X]
			1	2	3	4	5	
			Direct Losses	Direct Losses	Direct Written	Direct Premium	Direct Premium	
	16.11	Home	Incurred \$	Unpaid \$	Premium	Unearned \$ \$	Earned	
	16.12	Products	\$	\$	§	\$		
	16.13 16.14	Automobile Other*	\$ \$	\$	S	\$ \$ \$		
	* D' I	ose type of cover	rage.					

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1	Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5.	Yes [] No [X]
	Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F – Part 5. Provide the following information for this exemption:	
	17.11 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5 17.12 Unfunded portion of Interrogatory 17.11 17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 17.14 Case reserves portion of Interrogatory 17.11 17.15 Incurred but not reported portion of Interrogatory 17.11 17.16 Unearned premium portion of Interrogatory 17.11 17.17 Contingent commission portion of Interrogatory 17.11 Provide the following information for all other amounts included in Schedule F – Part 3 and excluded from Schedule F – Part 5, not included above	\$ \$ \$ \$ \$
	 17.18 Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5 17.19 Unfunded portion of Interrogatory 17.18 17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18 17.21 Case reserves portion of Interrogatory 17.18 17.22 Incurred but not reported portion of Interrogatory 17.18 17.23 Unearned premium portion of Interrogatory 17.18 17.24 Contingent commission portion of Interrogatory 17.18 	\$ \$ \$ \$
18.1	Do you act as a custodian for health savings accounts?	Yes[]No[X]
18.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$
18.3	Do you act as an administrator for health savings accounts?	Yes[]No[X]
18.4	If yes, please provide the balance of the funds adminstered as of the reporting date.	\$

FIVE - YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

		1	2	3	4	5
		2016	2015	2014	2013	2012
	Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1.		141,324,999	136,888,773	131,332,550	118,423,824	105,759,919
2.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
3.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
4.	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
5.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6.	Total (Line 35)	141,324,999	136,888,773	131,332,550	118,423,824	105,759,919
7	Net Premiums Written (Page 8, Part 1B, Col. 6) Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	133,917,041	128 856 101	103 483 750	100 645 635	07 328 464
	Descriptions (Lines 4.0.0.40.04.9.00)		128,856,101	123,483,752	109,645,635	97,328,464
l	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
10.						
11.						
12.	Total (Line 35)	133,917,041	128,856,101	123,483,752	109,645,635	97,328,464
	Statement of Income (Page 4)					
13.	Net underwriting gain (loss) (Line 8)	(13,505,748)		(11,551,802)	(13,571,832)	(17,699,939)
14.	7	15,259,711	14,110,815	13,751,756	17,685,529	24,476,406
15.		(389,491)	(315,566)	18,740	210,184	16,670
16. 17	Dividends to policyholders (Line 17) Federal and foreign income taxes incurred (Line 19)	1,000,000	2,637,740	2,000,000	2,335,344	4,220,408
	Not income (Line 20)	364,472	961,379	218,694	1,988,537	2,572,729
	Balance Sheet Lines (Pages 2 and 3)					
19.	Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	404,179,859	389,965,648	391,783,785	391,246,692	396,643,662
20.	Premiums and considerations (Page 2, Col. 3)					
	20.1 In course of collection (Line 15.1)	2,419,278	2,160,200	2,084,689	2,899,097	2,806,789
	20.2 Deferred and not yet due (Line 15.2)	39,956,634	37,668,365	34,527,343	30,071,731	25,796,870
21	20.3 Accrued retrospective premiums (Line 15.3) Total liabilities excluding protected cell business (Page 3, Line 26)	245,641,583	231,749,322	233,709,020	233,712,748	239,166,726
22.	Leaves (Page 2 Line 1)	129,500,630	116,685,842	119,638,132	123,561,624	135,847,010
	Loss adjustment expenses (Page 3, Line 3)	22,276,641	21,714,300	22,736,897	23,628,745	25,234,769
24.		65,732,771	64,223,166	62,584,082	57,707,999	50,884,215
25.	Capital paid up (Page 3, Lines 30 & 31)					
26.	Surplus as regards policyholders (Page 3, Line 37)	158,538,276	158,216,326	158,074,765	157,533,944	157,476,936
	Cash Flow (Page 5)					
27.	Net cash from operations (Line 11)	9,795,371	(5,107,913)	(2,458,268)	(12,051,181)	(9,791,518)
	Risk-Based Capital Analysis	450 500 070	450 040 000	450.074.705	457 500 044	457 470 000
28.	Total adjusted capital	158,538,276	158,216,326	158,074,765	157,533,944	157,476,936
29.	Authorized control level risk-based capital Percentage Distribution of Cash, Cash Equivalents and Invested Assets	18,649,086	17,960,776	18,436,633	17,056,823	16,177,542
	(Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30.		89.3	89.2	90.9	90.0	84.1
31.	, , , , , , , , , , , , , , , , , , , ,	5.2	4.4	4.5	4.9	9.6
32.	Mortgage loans on real estate (Lines 3.1 and 3.2)					
33.	Real estate (Lines 4.1, 4.2 & 4.3)	3.1	3.3	3.4	3.4	3.4
34.	Cash, cash equivalents and short-term investments (Line 5)	2.3	3.1	1.2	1.7	2.8
35.	Contract loans (Line 6)					
36.	Derivatives (Line 7)					
37.	Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.1
38. 39.	Receivables for securities (Line 9) Securities lending reinvested collateral assets (Line 10)			0.0		
40.	Aggregate write-ins for invested assets (Line 11)					
	Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
	Investments in Parent, Subsidiaries and Affiliates					
42.	Affiliated bonds, (Sch. D, Summary, Line 12, Col. 1)					
43.	Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1)					
44.	Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1)	1,350,844	1,321,062	1,291,616	1,273,597	1,264,386
45.	Affiliated short-term investments (subtotals included in Schedule DA Verification,					
40	Col. 5, Line 10)					
46.	Affiliated mortgage loans on real estate					
47. 48.	All other affiliated Total of above Lines 42 to 47	1,350,844	1,321,062	1,291,616	1,273,597	1,264,386
40. 49.	Total investment in parent included in Lines 42 to 47 above	1,350,044	1,021,002	1,231,010	1,213,091	1,204,300
50.	Percentage of investments in parent, subsidiaries and affiliates to surplus as					
	regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.9	0.8	0.8	0.8	0.8
		0.0	1 0.0	0.0	0.0	J

FIVE - YEAR HISTORICAL DATA

(Continued)

		1	2	3	4	5
		2016	2015	2014	2013	2012
	Capital and Surplus Accounts (Page 4)					
51.	Net unrealized capital gains (losses) (Line 24)	(165,297)	(659,577)	847,331	(1,165,639)	(1,989,727)
52. 53.	Dividends to stockholders (Line 35) Change in surplus as regards policyholders for the year (Line 38)	321,951	141,561	540,821	57,008	1,316,822
	Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	74,785,010	81,790,285	77,645,389	78,848,733	76,077,639
55. 56.	Property lines (Lines 1, 2, 9, 12, 21 & 26) Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)					
1	All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. 59.	Nonproportional reinsurance lines (Lines 31, 32 & 33) Total (Line 35)	74,785,010	81,790,285	77,645,389	78,848,733	76,077,639
	Net Losses Paid (Page 9, Part 2, Col. 4)					
60.	Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	70,684,869	80,024,655	74,536,272	73,881,775	72,470,550
61.	Property lines (Lines 1, 2, 9, 12, 21 & 26)					
62.	Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64.	Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65.	Total (Line 35)	70,684,869	80,024,655	74,536,272	73,881,775	72,470,550
	Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66.	Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
l	Losses incurred (Line 2)	63.1	60.6	59.5	59.9	64.5
68. 69.	Loss expenses incurred (Line 3) Other underwriting expenses incurred (Line 4)	16.8	16.3	16.0	16.4 36.9	17.3 37.0
70.	Net underwriting gain (loss) (Line 8)	(10.2)	(8.0)	(9.7)	(13.2)	(18.8)
	Other Percentages					
71.	Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15					
72	divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0 Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3	30.3	31.0	32.8	34.4	35.8
, 2.	divided by Page 4, Line 1 x 100.0)	79.9	76.8	75.6	76.3	81.8
73.	Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35	04.5				04.0
	divided by Page 3, Line 37, Col. 1 x 100.0)	84.5	81.4	78.1	69.6	61.8
	One Year Loss Development (000 omitted)					
74.	Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11)	11,800	7,738	4,074	(3,221)	(8,711)
75.	Percent of development of losses and loss expenses incurred to policyholders'	11,000	1,730	4,074	(3,221)	(0,711)
	surplus of prior year end (Line 74 above divided by Page 4, Line 21,	7.5	4.0	2.6	(2.0)	(F. C)
	Col. 1 x 100.0)	7.5	4.9	2.6	(2.0)	(5.6)
	Two Year Loss Development (000 omitted)					
76.	Development in estimated losses and loss expenses incurred 2 years before					
	the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12)	17,328	11,063	(1,094)	(9,816)	(28,384)
77.	Percent of development of losses and loss expenses incurred to reported					
	policyholders' surplus of second prior year end (Line 76 above divided			, <u>,, -</u>	,	//0 "
<u></u>	by Page 4, Line 21, Col. 2 x 100.0)	11.0	7.0	(0.7)	(6.3)	(18.1)

NOTE:	If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure	Yes [] No []
	requirements of SSAP No. 3, Accounting Changes and Correction of Errors?	
	If no, please explain:	

SCHEDULE P – ANALYSIS OF LOSSES AND LOSS EXPENSES SCHEDULE P – PART 1 – SUMMARY

(\$000 omitted)

	Pr	emiums Earne	ed		Loss and Loss Expense Payments							12
Years in	1	2	3			Defense	and Cost	Adju	sting	10	11	
Which				Loss Pa	yments	Containmer	nt Payments	and Other	Payments			Number of
Premiums				4	5	6	7	8	9		Total	Claims
Were										Salvage	Net Paid	Reported
Earned and	Direct			Direct		Direct		Direct		and	(Cols.	Direct
Losses Were	and		Net	and		and		and		Subrogation	4 - 5 + 6	and
Incurred	Assumed	Ceded	(Cols. 1–2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	- 7 + 8 - 9)	Assumed
1. Prior	XXX	XXX	XXX	2,507	681	148	20	129		13	2,083	XXX
2. 2007	136,208	11,343	124,865	83,164	3,358	5,050	23	16,840		2,469	101,673	XXX
3. 2008	118,728	9,972	108,756	70,584	1,038	4,129	42	16,620		1,505	90,253	XXX
4. 2009	101,670	7,173	94,497	69,602	1,975	3,901	13	13,206		1,281	84,721	XXX
5. 2010	91,451	8,028	83,423	67,521	1,802	3,468	34	13,649		1,050	82,802	XXX
6. 2011	92,459	7,451	85,008	69,231		4,577		13,484		1,290	87,292	XXX
7. 2012	102,597	8,432	94,165	69,190	1,169	4,874	17	13,544		744	86,422	XXX
8. 2013	111,600	8,778	102,822	65,562		4,863		13,751		815	84,176	XXX
9. 2014	126,456	7,849	118,607	58,097		4,913		14,136		583	77,146	XXX
10. 2015	135,250	8,033	127,217	46,216		4,515		13,887		304	64,618	XXX
11. 2016	139,815	7,408	132,407	20,933		2,271		10,772		73	33,976	XXX
12. Totals	XXX	XXX	XXX	622,607	10,023	42,709	149	140,018		10,127	795,162	XXX

		Losses	Unpaid	·	Defen	se and Cost (Containment L	Inpaid	Adjusti	ing and	23	24	25
	Case I	Basis	Bulk +	IBNR	Case	Basis	Bulk +	IBNR	Other	Unpaid			Number of
	13	14	15	16	17	18	19	20	21	22		Total Net	Claims
											Salvage	Losses	Outstanding
	Direct		Direct		Direct		Direct		Direct		and	and	Direct
	and		and		and		and		and		Subrogation	Expenses	and
	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1. Prior	19,421	10,788	175		542	245			1,653			10,758	xxx
2. 2007	1,691		101		70				179			2,041	XXX
3. 2008	1,067		128		56		1					1,369	XXX
4. 2009	5,684				92		3		549			6,405	XXX
5. 2010	5,036	3,028	113	48	87	17	5		507			2,655	XXX
6. 2011	3,332	388	183	10	204	13			341			3,656	XXX
7. 2012	10,400	6,356	702		260	15	43	5	1,079			6,031	XXX
8. 2013	7,898	783	2,290	330	478	21	27	4	947			10,502	XXX
9. 2014	10,339		3,859	378	739		84	8	1,230			15,865	XXX
10. 2015	15,644		12,356	1,618	1,322		128	13	2,557			30,376	XXX
11. 2016	24,023		32,179	3,393	2,287		705	76	6,394			62,119	XXX
12. Totals	104,535	21,343	52,163	5,854	6,137	311	1,003	106	15,553			151,777	XXX

		To	otal Losses and	ı	Loss and L	oss Expense Po	ercentage			34	Net Bala	nce Sheet
		Loss	Expenses Incu	rred	(Incurr	ed/Premiums Ea	arned)	Nontabula	ar Discount	Inter-	Reserves A	fter Discount
		26	27	28	29	30	31	32	33	Company	35	36
		Direct			Direct					Pooling		Loss
		and			and				Loss	Participation	Losses	Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	8,808	1,950
2.	2007	107,095	3,381	103,714	78.626	29.807	83.061				1,792	249
3.	2008	92,702	1,080	91,622	78.079	10.830	84.245				1,195	174
4.	2009	93,114	1,988	91,126	91.585	27.715	96.433				5,761	644
5.	2010	90,386	4,929	85,457	98.835	61.398	102.438				2,073	582
6.	2011	91,359	411	90,948	98.810	5.516	106.988				3,117	539
7.	2012	100,092	7,639	92,453	97.558	90.595	98.182				4,669	1,362
8.	2013	95,816	1,138	94,678	85.857	12.964	92.080				9,075	1,427
9.	2014	93,397	386	93,011	73.857	4.918	78.419				13,820	2,045
10.	2015	96,625	1,631	94,994	71.442	20.304	74.671				26,382	3,994
11.	2016	99,564	3,469	96,095	71.211	46.828	72.575				52,809	9,310
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	129,501	22,276

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements, which will reconcile Part 1 with Parts 2 and 4.

SCHEDULE P - PART 2 - SUMMARY

	INCUR	RED NET LOS	SES AND DEF	ENSE AND C	OST CONTAIN	MENT EXPEN	SES REPORT	ED AT YEAR E	END (\$000 OM	ITTED)	DEVEL	OPMENT
Years in	1	2	3	4	5	6	7	8	9	10	11	12
Which												
Losses Were											One	Two
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Year	Year
1. Prior	138,877	126,789	112,174	101,408	100,465	95,507	92,410	88,309	88,224	88,202	(22)	(107)
2. 2007	107,830	102,174	94,395	92,676	89,299	86,576	86,168	88,765	86,755	86,695	(60)	(2,070)
3. 2008	XXX	84,231	85,750	83,289	77,607	76,653	76,486	75,744	75,180	74,885	(295)	(859)
4. 2009	XXX	XXX	84,563	81,644	76,090	76,042	75,567	76,211	76,411	77,371	960	1,160
5. 2010	XXX	XXX	XXX	76,022	70,119	71,877	71,614	71,564	71,495	71,301	(194)	(263)
6. 2011	XXX	XXX	XXX	XXX	74,526	72,740	76,045	75,607	76,228	77,123	895	1,516
7. 2012	XXX	XXX	XXX	XXX	XXX	72,829	70,713	74,930	77,098	77,830	732	2,900
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	68,900	70,847	77,575	79,980	2,405	9,133
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	71,727	72,476	77,645	5,169	5,918
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76,340	78,550	2,210	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	78,929	XXX	XXX
									12. Totals		11,800	17,328

SCHEDULE P - PART 3 - SUMMARY

	CUMULAT	VE PAID NET	LOSSES AND	DEFENSE AN	D COST CON	TAINMENT EX	PENSES REP	ORTED AT YE	AR END (\$000	OMITTED)	11	12
	1	2	3	4	5	6	7	8	9	10	Number of	Number of
Years in											Claims	Claims
Which											Closed With	Closed
Losses Were											Loss	Without Loss
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Payment	Payment
1. Prior	000	34,048	50,958	59,544	65,597	68,262	70,548	75,227	77,143	79,097	XXX	XXX
2. 2007	27,723	54,203	65,963	72,997	76,936	81,080	82,956	82,337	84,657	84,833	XXX	XXX
3. 2008	XXX	21,739	45,872	58,896	65,943	69,309	71,688	73,256	73,490	73,633	XXX	XXX
4. 2009	XXX	XXX	22,460	44,923	58,064	65,355	69,509	71,661	72,954	71,515	XXX	XXX
5. 2010	XXX	XXX	XXX	19,837	42,857	55,129	62,826	66,311	68,406	69,153	XXX	XXX
6. 2011	XXX	XXX	XXX	XXX	23,047	47,788	61,476	68,165	71,816	73,808	XXX	XXX
7. 2012	XXX	XXX	XXX	XXX	XXX	22,951	47,028	59,942	69,839	72,878	XXX	XXX
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	22,356	47,655	63,415	70,425	XXX	XXX
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,720	47,311	63,010	XXX	XXX
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25,793	50,731	XXX	XXX
11. 2016	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23,204	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

	BULK A	AND IBNR RESE	RVES ON NET LO	SSES AND DEF	ENSE AND COST	CONTAINMENT	EXPENSES REF	PORTED AT YEA	R END (\$000 OM	ITTED)
	1	2	3	4	5	6	7	8	9	10
Years in										
Which										
Losses Were										
Incurred	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
1. Prior	56,731	38,727	25,437	12,949	10,006	4,205	1,973	393	333	179
2. 2007	37,123	18,264	9,326	4,836	2,529	728	299	646	204	10
3. 2008	XXX	27,073	12,179	6,547	3,130	966	457	408	109	129
4. 2009	XXX	XXX	26,746	9,312	2,444	1,701	293	325	73	80
5. 2010	XXX	XXX	XXX	19,521	3,960	2,281	872	601	188	70
6. 2011	XXX	XXX	XXX	XXX	22,862	5,413	3,086	998	352	180
7. 2012	XXX	XXX	XXX	XXX	XXX	24,958	7,272	2,172	1,025	663
8. 2013	XXX	XXX	XXX	XXX	XXX	XXX	22,212	4,772	2,360	1,983
9. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,713	7,691	3,557
10. 2015	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26,583	10,85
11. 2016	XXX	XXX	XXX	XXX	XXX	xxx	XXX	XXX	xxx	29,415

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

		1	and Members Return Premium	s, Including Policy ship Fees Less as and Premiums s Not Taken	4 Dividends Paid or Credited to Policyholders	5 Direct Losses Paid	6 Direct	7	8 Finance and Service Charges Not	9 Direct Premium Written for Federal Purchasing
	States, Etc.	Active Status	Direct Premiums Written	Direct Premiums Earned	on Direct Business	(Deducting	Losses	Direct Losses Unpaid	Included in Premiums	Groups (Included in Col. 2)
<u> </u>			willen	Earrieu	Dusilless	Salvage)	Incurred	Ulipalu	Fremiums	III COI. 2)
	Alabama AL Alaska AK	N								
	Arizona AZ	N								
4.	Arkansas AR	N N								
5.	California CA	N								
6.	Colorado CO	N								
7.		N								
8.	Delaware DE	N								
9.	District of Columbia DC Florida FL	N								
11.		N N								
12.		N								
13.		N								
14.	Illinois IL	N								
15.	Indiana IN	N								
16.	lowaIA	N								
17.		. N								
1	Kentucky KY	N								
	Louisiana LA Maine ME	N N								
	Maryland MD	N								
	Massachusetts MA	L								
	Michigan MI	N								
	Minnesota MN	N								
	Mississippi MS	. N								
1	Missouri MO	. N								
27.		N								
28.		N								
29. 30.	Nevada NV New Hampshire NH	N N								
	New Jersey NJ	N								
32.	New Mexico NM	N								
	New York NY	N								
	North Carolina NC	N.								
1	North Dakota ND	N								
36.	Ohio OH	N								
37.	Oklahoma OK Oregon OR	N N								
39.		1 1 1 1 1								
40.		^N L	134,976,989	133,663,432	963,000	70,326,747	70,035,235	143,037,361	141,765	
41.		N					: :/::::::::			
42.	South Dakota SD	N								
43.	Tennessee TN	. N								
44.	Texas TX	N.								
45.	Utah UT	. N								
46. 47.	Vermont VT Virginia VA	N								
48.	Washington WA	N.								
49.	West Virginia WV	N N								
50.	Wisconsin WI	N								
51.		N								
52.	American Samoa AS	N								
53.	Guam GU	N								
54. 55.	Puerto Rico PR U.S. Virgin Islands VI	N N								
	Northern Mariana Islands MP	N.								
57.		N N								
58.	Aggregate Other Alien OT	XXX								
59.	Totals	(a) 2	134,976,989	133,663,432	963,000	70,326,747	70,035,235	143,037,361	141,765	
	DETAILS OF WRITE-INS									
58001.	,	XXX								
58001.		XXX								
58003.		XXX			N)NE				
58998.	Summary of remaining write-ins	1								
F0000	for Line 58 from overflow page	XXX								
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX								
Ь	cosso pius sosso) (Lilie so above)	1 ~ ~ ~	I		1	I	I	I	I	

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines In the state; (N) None of the above - Not allowed to write business in the state.

	None											Ε	хр	la	na	tic	n	of	b	as	is	of	a	llo	ca	tic	n	of	pr	en	niu	ım	s l	οу	st	ate	es,	et	tc.													•
	NOLIE	 		 																													 				 		 		 	 	 	 								
l		 		 	 		 	 	 	 	 																													 			٠.	 ٠.		 	٠.	 	 	 	 	
l		 		 	 		 	 	 	 	 					٠.																								 			٠.	 ٠.		 	٠.	 	 	 	 ٠.	 ı
l		 		 	 		 	 	 	 																														 				 		 		 	 	 	 	
l		 		 																				٠.									 	٠.	٠.	٠.	 ٠.	٠.	 	٠.	 	 	 	 								
l		 		 																				٠.									 	٠.	٠.	٠.	 ٠.	٠.	 	٠.	 	 	 	 								
l		 		 																													 			٠.	 		 	٠.	 	 	 	 ٠.								
l		 		 																													 				 		 		 	 	 	 								
l		 		 																													 				 		 		 	 	 	 								
I																																																				1

The Beacon Mutual Insurance Company (RI)

(Parent – 100% Owner)

NAIC # - 24017

FEIN # - 05-0458697

Castle Hill Insurance Company (RI) (Subsidiary)

NAIC # - 11837 FEIN # - 20-0317088 BMIC Service Corp. (RI) (Subsidiary) NAIC # - N/A FEIN # - 06-1490630

OVERFLOW PAGE FOR WRITE-INS

Page 4 - Continuation

STATEMENT OF INCOME

	1	2
REMAINING WRITE-INS AGGREGATED AT LINE 14		
FOR MISCELLANEOUS INCOME	Current Year	Prior Year
1404. Impaired Loss - Subsidiary		150,000
1497. Totals (Lines 1404 through 1496) (Page 4, Line 1498)		150,000

ALPHABETICAL INDEX TO PROPERTY ANNUAL STATEMENT

Assets	. 2	Schedule E – Part 3 – Special Deposits	E28
Cash Flow	. 5	Schedule E – Verification Between Years	SI15
Exhibit of Capital Gains (Losses)	. 12	Schedule F – Part 1	20
Exhibit of Net Investment Income		Schedule F – Part 2	. 21
Exhibit of Nonadmitted Assets	13	Schedule F – Part 3	22
Exhibit of Premiums and Losses (State Page)	. 19	Schedule F – Part 4	23
Five-Year Historical Data		Schedule F – Part 5	24
General Interrogatories		Schedule F – Part 6 - Section 1	25
Jurat Page	4	Schedule F – Part 6 - Section 2	
Liabilities, Surplus and Other Funds	. 3	Schedule F – Part 7	07
Notes To Financial Statements		Schedule F – Part 8	. 28
Overflow Page For Write-ins		Schedule F – Part 9	. 29
Schedule A – Part 1	E04	Schedule H – Accident and Health Exhibit – Part 1	30
Schedule A – Part 2	E02	Schedule H – Part 2, Part 3 and Part 4	. 31
Schedule A – Part 3	E00	Schedule H – Part 5 – Health Claims	
Schedule A – Verification Between Years	SI02	Schedule P – Part 1 – Summary	
Schedule B – Part 1	E04	Schedule P – Part 1A – Homeowners/Farmowners	35
Schedule B – Part 2	E05	Schedule P – Part 1B – Private Passenger Auto Liability/Medical	. 36
Schedule B – Part 3	E06	Schedule P – Part 1C – Commercial Auto/Truck Liability/Medical	. 37
Schedule B – Verification Between Years	SI02	Schedule P – Part 1D – Workers' Comp (Excluding Excess Workers' Comp)	. 38
Schedule BA – Part 1	E07	Schedule P – Part 1E – Commercial Multiple Peril	. 39
Schedule BA – Part 2	E08	Schedule P – Part 1F – Section 1 – Medical Professional Liability	
Schedule BA – Part 3	-00	- Occurrence	40
Schedule BA – Verification Between Years	SI03	Schedule P – Part 1F – Section 2 – Medical Professional Liability	
Schedule D – Part 1	E40	– Claims-Made	41
Schedule D – Part 1A – Section 1	CIOE	Schedule P – Part 1G - Special Liability (Ocean, Marine, Aircraft (All	
Schedule D – Part 1A – Section 2	SI08	Perils), Boiler and Machinery)	. 42
Schedule D – Part 2 – Section 1		Schedule P – Part 1H – Section 1 – Other Liability – Occurrence	43
Schedule D – Part 2 – Section 2	E12	Schedule P – Part 1H – Section 2 – Other Liability – Claims-Made	44
Schedule D – Part 3	E13	Schedule P – Part 1I – Special Property (Fire, Allied Lines, Inland Marine,	
Schedule D – Part 4	E14	Earthquake, Burglary & Theft)	45
Schedule D – Part 5	E45	Schedule P – Part 1J – Auto Physical Damage	46
Schedule D – Part 6 – Section 1		Schedule P – Part 1K – Fidelity/Surety	. 47
Schedule D – Part 6 – Section 2	E40	Schedule P – Part 1L – Other (Including Credit, Accident and Health)	48
Schedule D – Summary By Country		Schedule P – Part 1M – International	. 49
Schedule D – Verification Between Years	SI03	Schedule P – Part 1N – Reinsurance - Nonproportional Assumed Property	50
Schedule DA – Part 1	-47	Schedule P – Part 10 – Reinsurance - Nonproportional Assumed Liability	51
Schedule DA – Verification Between Years	SI10	Schedule P – Part 1P – Reinsurance - Nonproportional Assumed Financial Lines	52
Schedule DB – Part A – Section 1		Schedule P – Part 1R – Section 1 – Products Liability – Occurrence	53
Schedule DB – Part A – Section 2		Schedule P – Part 1R – Section 2 – Products Liability – Claims – Made	
Schedule DB – Part A – Verification Between Years	SI11	Schedule P – Part 1S – Financial Guaranty/Mortgage Guaranty	55
Schedule DB – Part B – Section 1	E00	Schedule P – Part 1T – Warranty	. 56
Schedule DB – Part B – Section 2	E21	Schedule P – Part 2, Part 3 and Part 4 - Summary	34
Schedule DB – Part B – Verification Between Years	SI11	Schedule P – Part 2A – Homeowners/Farmowners	
Schedule DB – Part C – Section 1	0140	Schedule P – Part 2B – Private Passenger Auto Liability/Medical	
Schedule DB – Part C – Section 2		Schedule P – Part 2C – Commercial Auto/Truck Liability/Medical	
Schedule DB - Part D - Section 1		Schedule P – Part 2D – Workers' Comp (Excluding Excess Workers' Comp)	
Schedule DB - Part D - Section 2		Schedule P – Part 2E – Commercial Multiple Peril	
Schedule DB - Verification		Schedule P – Part 2F – Section 1 – Medical Professional Liability	
Schedule DL - Part 1	E0.4	- Occurrence	58
Schedule DL - Part 2	. =0=	Schedule P - Part 2F - Medical Professional Liability - Claims - Made	58
Schedule E – Part 1 – Cash		Schedule P – Part 2G – Special Liability (Ocean Marine, Aircraft (All Perils),	
Schedule E – Part 2 – Cash Equivalents	E27	Boiler and Machinery)	58

ALPHABETICAL INDEX TO PROPERTY ANNUAL STATEMENT

Schedule P – Part 2H – Section 1 – Other Liability – Occurrence	58	Schedule P – Part 4I – Special Property (Fire, Allied Lines, Inland Marine,	
Schedule P – Part 2H – Section 2 – Other Liability – Claims – Made	58	Earthquake, Burglary and Theft)	69
Schedule P - Part 2I - Special Property (Fire, Allied Lines, Inland Marine,		Schedule P – Part 4J – Auto Physical Damage	69
Earthquake, Burglary, and Theft)	59	Schedule P – Part 4K – Fidelity/Surety	69
Schedule P – Part 2J – Auto Physical Damage	59	Schedule P – Part 4L – Other (Including Credit, Accident and Health)	69
Schedule P – Part 2K – Fidelity, Surety	59	Schedule P – Part 4M – International	69
Schedule P – Part 2L – Other (Including Credit, Accident and Health)	59	Schedule P – Part 4N – Reinsurance - Nonproportional Assumed Property	70
Schedule P – Part 2M – International	59	Schedule P – Part 4O – Reinsurance - Nonproportional Assumed Liability	70
Schedule P – Part 2N – Reinsurance - Nonproportional Assumed Property	60	Schedule P – Part 4P – Reinsurance - Nonproportional Assumed Financial Lines	70
Schedule P – Part 20 – Reinsurance - Nonproportional Assumed Liability	60	Schedule P – Part 4R – Section 1 – Products Liability – Occurrence	71
Schedule P – Part 2P – Reinsurance - Nonproportional Assumed Financial Lines	60	Schedule P – Part 4R – Section 2 – Products Liability – Claims-Made	71
Schedule P – Part 2R – Section 1 – Products Liability – Occurrence	61	Schedule P – Part 4S – Financial Guaranty/Mortgage Guaranty	71
Schedule P – Part 2R – Section 2 – Products Liability – Claims-Made	61	Schedule P – Part 4T – Warranty	71
Schedule P – Part 2S – Financial Guaranty/Mortgage Guaranty	61	Schedule P – Part 5A – Homeowners/Farmowners	72
Schedule P – Part 2T – Warranty	61	Schedule P – Part 5B – Private Passenger Auto Liability/Medical	73
Schedule P – Part 3A – Homeowners/Farmowners	62	Schedule P – Part 5C – Commercial Auto/Truck Liability/Medical	74
Schedule P – Part 3B – Private Passenger Auto Liability/Medical	62	Schedule P – Part 5D – Workers' Comp (Excluding Excess Workers' Comp)	75
Schedule P – Part 3C – Commercial Auto/Truck Liability/Medical	62	Schedule P – Part 5E – Commercial Multiple Peril	76
Schedule P – Part 3D – Workers' Comp (Excluding Excess Workers' Comp)	62	Schedule P – Part 5F – Medical Professional Liability – Claims-Made	78
Schedule P – Part 3E – Commercial Multiple Peril	62	Schedule P – Part 5F – Medical Professional Liability – Occurrence	77
Schedule P – Part 3F – Section 1 – Medical Professional Liability		Schedule P – Part 5H – Other Liability – Claims-Made	80
- Occurrence	63	Schedule P – Part 5H – Other Liability – Occurrence	79
Schedule P – Part 3F – Section 2 – Medical Professional Liability		Schedule P – Part 5R – Products Liability – Claims-Made	82
- Claims-Made	63	Schedule P – Part 5R – Products Liability – Occurrence	81
Schedule P – Part 3G – Special Liability (Ocean Marine, Aircraft (All Perils),		Schedule P – Part 5T – Warranty	83
Boiler and Machinery)	63	Schedule P – Part 6C – Commercial Auto/Truck Liability/Medical	84
Schedule P – Part 3H – Section 1 – Other Liability – Occurrence	63	Schedule P – Part 6D – Workers' Comp (Excluding Excess Workers' Comp)	84
Schedule P – Part 3H – Section 2 – Other Liability – Claims-Made	63	Schedule P – Part 6E – Commercial Multiple Peril	85
Schedule P – Part 3I – Special Property (Fire, Allied Lines, Inland Marine,		Schedule P – Part 6H – Other Liability – Claims-Made	86
Earthquake, Burglary, and Theft)	64	Schedule P – Part 6H – Other Liability – Occurrence	85
Schedule P – Part 3J – Auto Physical Damage	64	Schedule P – Part 6M – International	86
Schedule P – Part 3K – Fidelity/Surety	64	Schedule P – Part 6N – Reinsurance - Nonproportional Assumed Property	87
Schedule P – Part 3L – Other (Including Credit, Accident and Health)	64	Schedule P – Part 60 – Reinsurance - Nonproportional Assumed Liablity	87
Schedule P – Part 3M – International	64	Schedule P – Part 6R – Products Liability – Claims-Made	88
Schedule P – Part 3N – Reinsurance - Nonproportional Assumed Property	65	Schedule P – Part 6R – Products Liability – Occurrence	88
Schedule P – Part 30 – Reinsurance - Nonproportional Assumed Liability	65	Schedule P – Part 7A – Primary Loss Sensitive Contracts	89
Schedule P – Part 3P – Reinsurance - Nonproportional Assumed Financial Lines	65	Schedule P – Part 7B – Reinsurance Loss Sensitive Contracts	91
Schedule P – Part 3R – Section 1 – Products Liability – Occurrence	66	Schedule P Interrogatories	93
Schedule P – Part 3R – Section 2 – Products Liability – Claims-Made	66	Schedule T – Exhibit of Premiums Written	94
Schedule P – Part 3S – Financial Guaranty/Mortgage Guaranty	66	Schedule T – Part 2 – Interstate Compact	95
Schedule P – Part 3T – Warranty	66	Schedule Y – Information Concerning Activities of Insurer Members	
Schedule P – Part 4A – Homeowners/Farmowners	67	of a Holding Company Group	96
Schedule P – Part 4B – Private Passenger Auto Liability/Medical	67	Schedule Y - Part 1A - Detail of Insurance Holding Company System	
Schedule P – Part 4C – Commercial Auto/Truck Liability/Medical	67	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	98
Schedule P – Part 4D – Workers' Comp (Excluding Excess Workers' Comp)	67	Statement of Income	4
Schedule P – Part 4E – Commercial Multiple Peril	67	Summary Investment Schedule	SI01
Schedule P – Part 4F – Section 1 – Medical Professional Liability		Supplemental Exhibits and Schedules Interrogatories	99
- Occurrence	68	Underwriting and Investment Exhibit Part 1	
Schedule P – Part 4F – Section 2 – Medical Professional Liability		Underwriting and Investment Exhibit Part 1A	7
- Claims-Made	68	Underwriting and Investment Exhibit Part 1B	8
Schedule P – Part 4G – Special Liability (Ocean Marine, Aircraft (All Perils),		Underwriting and Investment Exhibit Part 2	9
Boiler and Machinery)	68	Underwriting and Investment Exhibit Part 2A	10
Schedule P – Part 4H – Section 1 – Other Liability – Occurrence	68	Underwriting and Investment Exhibit Part 3	11
Schedule P – Part 4H – Section 2 – Other Liability – Claims-Made	68		